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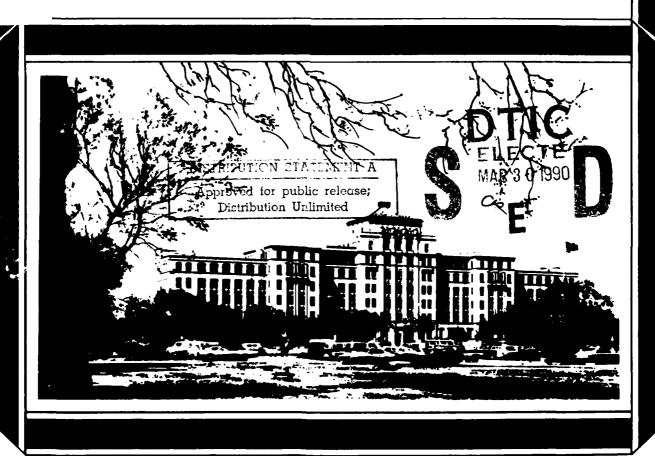


DEPARTMENT OF CLINICAL INVESTIGATION

ANNUAL RESEARCH PROGRESS REPORT

FISCAL YEAR 1989 VOLUME 2

BROOKE ARMY MEDICAL CENTER FORT SAM HOUSTON, TEXAS 78234



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REPORT DOCUMENTATION	PAGE	READ INSTRUCTIONS BEFORE COMPLETING FORM
REPORT NUMBER	2. GOVT ACCESSION NO.	3. RECIPIENT'S CATALOG NUMBER
RCS MED-300		
TITLE (and Subtitle)	*	5. TYPE OF REPORT & PERIOD COVERED
ANNUAL RESEARCH PROGRESS REPORT	:	ANNUAL - FY 89
		6. PERFORMING ORG. REPORT NUMBER
AUTHOR(a)		8. CONTRACT OR GRANT NUMBER(#)
RICKY D. LATHAM		
Major, MC		
PERFORMING ORGANIZATION NAME AND ADDRESS	··· ·	10. PROGRAM ELEMENT, PROJECT, TASK AREA & WORK UNIT NUMBERS
Department of Clinical Investigation	tion	AREA & WORK UNIT NUMBERS
Brooke Army Medical Center	'	
Fort Sam Houston, TX 78234-6200		
. CONTROLLING OFFICE NAME AND ADDRESS		12. REPORT DATE
Commander		1 October 1989
Brooke Army Medical Center		13. NUMBER OF PAGES
Fort Sam Houston, TX 78234-6200		609
MONITORING AGENCY NAME & ADDRESS(If different	t from Controlling Office)	15. SECURITY CLASS. (of this report)
Office of The Surgeon General		Unclassified
Department of the Army		
Washington, D.C. 20314		15a. DECLASSIFICATION/DOWNGRADING SCHEDULE
DISTRIBUTION STATEMENT (of this Report) APPROVED FOR PUBLIC RELEASE: DIS	TOTRUTTON HATTME	rrn
7. DISTRIBUTION STATEMENT (of the abstract entered n/a	in Block 20, if different fro	m Report)
8. SUPPLEMENTARY NOTES The findings in this report are of the Army position unless so d		
D. KEY WORDS (Continue on reverse side if necessary as		
Clinical Investigations; all med	ical specialties	•
Publications, presentations;	aabima mastatii	1 Annuagh, Bushing Chatta
Detail Summary Sheets (Study Obj	ective; Technica	i Approach; Progress; Status
ABSTRACT (Continue on reverse elde it necessary an Subject report identifies the re Medical Center investigators thr Investigation Committee, the Ins Committee and registered with the	search activitie ough protocols a titutional Revie	pproved by the Clinical w Board, and the Animal Care
FY 1988. Report also includes k Brooke Army Medical Center staff	nown presentatio	ns and publications by the

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Block 20. Abstract

conducted under the provisions of AR 40-38, Clinical Investigation Program; AR 40-7, Use of Investigational Drugs in Humans; USAMRDC 70-25, Use of Volunteers as Subjects of Research; HSC Reg 40-23, Management of Clinical Investigation Protocols and Reports; and BAMC Memo 40-98, Department of Clinical Investigation, to insure the medical well-being, preservation of rights and dignity of human subjects who participated in these investigational studies. Research studies involving the use of laboratory animals were conducted under the provisions of AR 70-18, Laboratory Animals, Procurement, Transportation, Use, Care, and Public Affairs.

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POG 8739	Evaluation of Alpha Interferon in the Treatment of Recurrent Brain Tumors in Children, Phase II. (0)	536
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POG 8743	Treatment in 'Better Risk' Neuroblastoma: POG Stage B (All Ages) and POG Stage C, D, and DS (VS) <365 Days. (O)	538
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POG 8823	Recombinant Alpha-Interferon in Childhood Chronic Myelogenous Leukemia, Phase II. (0)	548
POG 8827	Treatment of Children with Hodgkin's Disease in Relapse, Phase II. (0)	549
POG 8828	Late Effects of Treatment of Hodgkin's Disease, Nontherapeutic Study. (0)	550
POG 8829	A Case-Control Study of Hodgkin's Disease in Childhood - A Nontherapeutic Study. (0)	551
POG 8832	Pre-Irradiation Combination Chemotherapy with Cisplatin and ARA-C for Children with Incompletely Resected Supratentorial Malignant Tumors, Phase II. (0)	552
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POG	8850	Evaluation of Vincristine, Adriamycin, Cyclophosphamide, and Dactinomycin with or without the Addition of Ifosfamide and Etoposide in the Treatment of Patients with Newly-Diagnosed Ewing's Sarcoma or Primitive Neuroectodermal Tumor of Bone, Phase III. (0)	555	
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POG	8865	Recombinant Alpha-Interferon in Relapsed T-Cell Disease, Phase II. (0)	559	
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POG	8930	A Comprehensive Genetic Analysis of Brain Tumors. (0)	562	
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29 Sep 89	Proj No: A-		Status	: Ongoing
Gravitational Effects of Pressure Suit Infl.		cs in the	Normotensive	Primate and

Start Date 26 Mar 86	Est Comp Date:
Principal Investigator	Facility
Ricky D. Latham, MAJ, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Medicine/Cardiology	Bernard J. Rubal, Ph.D.
Key Words:	Robert Schwartz, MAJ, USAF MC
	Paul Celio, MAJ, USAF MC
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost: 12,425.00
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled t	
Date of Periodic Review	Results

Objective(s): 1) To describe the effects of the upright posture on waveform contour, regional PWV, Zin and reflection along the aorta.

2) To determine the effect of pressure suit inflation in the upright posture on central systemic pressure, aortic and ventricular dimensions, and cardiac function.

Technical Approach: We evaluated the hemodynamic response to passive upright 70° tilt in 6 baboons to assess the effects of gravity on systemic compliance (C), characteristic aortic input impedance (Zc) and peripheral resistance (R). High-fidelity catheters were used to record aortic root pressure and flow velocity which were digitized at 200 Hz. Thermodilution cardiac outputs were obtained. Data were fitted to a computer model (CM) of a 3-element Windkessel to determine Zc, C, R. There were compared to conventional calculations (CC) of SVR, Fourier analysis for Zc, and time constant of pressure decay for C.

Progress: The data show that the CM fit of pressure and flow to determine Zc, C, and R produces similar results to independent calculations of these parameters. Finally, gravitational stress to passive upright tilt has its most prominent effect on C and little effect on Zc and R.

Date: 26 Sep 89 Proj No: A-3-87 Status: Ongoing Title: Treatment of Chlorine Gas Inhalation Injury with Nebulized Sodium Bicarbonate Using a Sheep Model Start Date 6 Jan 87 Est Comp Date: Principal Investigator(vice Singletary) Facility Carey Chisholm, MAJ, MC Brooke Army Medical Center Dept/Svc Associate Investigators: Department of Emergency Medicine Alan Morgan, CPT, MC Key Words: Chlorine gas inhalation

Accumulative MEDCASE Est Accumulative

Cost: OMA Cost: 4005.92

Number of Subjects Enrolled During Reporting Period:

Total Number of Subjects Enrolled to Date:

Date of Periodic Review Results

Objective(s): To determine the effect of treatment of chlorine gas inhalation injury with nebulized 5% sodium bicarbonate solution, using a sheep model.

Technical Approach: In Phase I, degree of injury induced by chlorine gas will be determined by exposing 10 subjects to chlorine gas, 500 ppm, for various periods of time. Subjects will be anesthetized, intubated and exposed to chlorine gas by insufflation technique as described under Phase II, with arterial blood gas determinations every 30 minutes following exposure for 2 hours. Following chlorine exposure, subjects will e observed for 24 hours, then sacrificed and necropsy performed.

In Phase II, subjects will be divided into 3 groups of eight sheep each. Group A will be exposed to chlorine gas, 500 ppm, for a period of time as determined in Phase I, followed by nebulized normal saline for 5 min. Group B will be exposed to chlorine gas, 500 ppm, for the same period as for Group A, followed b7 5% sodium bicarbonate solution for 5 minutes. Group C will not be exposed to chlorine gas, but will be given nebulized 5% sodium bicarbonate solution for 5 minutes. Groups A and B will begin treatment 30 minutes post chlorine exposure.

Progress: This study remains open for completion of manuscript which is being prepared.

Date:	12 Sep 89	Proj No:	A-5-87		Status:	Terminated
Title:	The Effect of D	ietary Fiber on	the Incidence	of	Adenocarcin	oma Following
Ureter	osi <mark>gmo</mark> idostomy in	Rats				

Start Date 2 Apr 87	Est Comp Date:
Principal Investigator	Facility
William H. Boykin, Jr., CPT, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/Urology	Ian M. Thompson, MAJ, MC
Key Words:	Gene B. Hubbard, D.V.M.
	Marlene Gaines, SGT
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost: 1,781.00
Number of Subjects Enrolled During Repo	orting Period:
Total Number of Subjects Enrolled to Da	ate:
Date of Periodic Review 4 Oct 89	Results Terminate

Objective(s): To determine if alteration in dietary fiber content decreases the incidence of adenocarcinoma following ureterosigmoidostomy in an animal model.

Technical Approach: One hundred twenty male Sprague-Dawley rats will be obtained, housed and fed standard lab chow and tap water ad lib. On the night before the surgical procedure, all animals will be kept NPO. All animals will undergo ureterosigmoidostomy and then randomized into two treatment arms: one group will be recovered/fed lab chow with a higher fiber content, and the other will receive a diet high in protein and carbohydrates but with minimal fiber. The remainder of the study will be conducted as outlined in the study protocol.

Progress: Study terminated due to lack of progress.

Date: 12 Oct 89	Proj No:	A-7-87	Status:	Terminated
Title: Urodynamic Profile of	Three Typ	es of Urinar	y Reservoirs	
Start Date 28 May 87		Est Comp Da	te:	
Principal Investigator		Facility		
William H. Boykin, Jr., CPT,	MC	Brooke Army	Medical Center	
Dept/Svc		Associate I	nvestigators:	
Department of		Ian M. Thom	pson, MAJ, MC	
Key Words:		William Ehl	er, D.V.M.	
Accumulative MEDCASE		Est Accumul	ative	
Cost:		OMA Cost:		
Number of Subjects Enrolled D			! <u></u>	
Total Number of Subjects Enro		te:		
Date of Periodic Review 4 Oc	t 89	Res	ults Terminate	
Objective(s): 1) To develop	an animal	model for t	hree basic types	of enteral

urinary reservoirs.

2) To objectively document with urodynamics the pressure characteristics of the different reservoirs.

Technical Approach: This study will be conducted at the Clinical Investigation Facility, Wilford Hall USAF Medical Center. Fifteen pigs will be randomized into three treatment groups. One group will undergo isoperistaltic/antiperistaltic anastomosis of two segments of ileum, the second group will undergo a similar procedure utilizing large bowel, and the third group will have a reservoir fashioned from a combination of large and small bowel. The technical details will be carried out as outlined in the study protocol.

Progress: Study terminated due to lack of progress.

 6 Sep 89	Proj No: A-12-87	Status: Ongoing
Hemodynamic Effect volemic Swine	of Anesthetic Induction	with Ketamine or Etomidate

Start Date 28 Sep 87	Est Comp Date:
Principal Investigator (vice Knight)	Facility
Charles P. Kingsley, MAJ, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/Anesthesiology	Kevin Olson, CPT, MC
Key Words:	1
Hypovolemia	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost: 1166.73
Number of Subjects Enrolled During Rep	oorting Period:
Total Number of Subjects Enrolled to I	
Date of Periodic Review	Results

Objective(s): To determine which anesthetic induction agent provides optimal hemodynamic stability in the presence of acute hypovolemia secondary to hemorrhage.

Technical Approach: The effects of induction doses of etomidate, ketamine, and thiopental were evaluated in acutely traumatized, moderately hypovolemic swine. Twenty-five acutely instrumented swine were mechanically ventilated with 70% nitrous oxide and hemorrhaged to a mean arterial pressure of 40 mmHg. After allowing the animals to stabilize, etomidate 1.2 mg/kg, ketamine 6.0 mg/kg, or thiopental 6.0 mg/kg were administered as a bolus to simulate the induction of anesthesia. Hemodynamic measurements were then made at 1, 5, 15, and 30 minutes after drug injection.

Progress: Data analysis and retrieval system upgraded. Data now being reanalyzed.

Date: 6 Sep 89	Proj No: A-13-87	Status: Ongoing	
Title: A Comparison of the			
with Normal Saline, Hetastar	ch, Whole Blo <mark>od, an</mark> d Hype	rtonic Saline on Intra-	
cranial Pressure, Intracrani	al Compliance and Cerebra	l Metabolism	
Start Date 28 Sep 87	Est Comp Date	:	
Principal Investigator	Facility		
Joseph P. Ducey, MAJ, MC	Brooke Army M	ledical Center	
Dept/Svc	Associate Inv	estigators:	
Department of Surgery	David W. Mozi	ngo, CPT, MC	
Key Words:	es, SGT		
Shock, hemorragic	Theopolis Pea	ice, COL, VC	
Accumulative MEDCASE	Est Accumulat	ive	
Cost: OMA Cost: 1532.00			
Number of Subjects Enrolled	During Reporting Period:		
Total Number of Subjects Enr	• • •		
Date of Periodic Review Results			
Agricus de constitu			

Objective(s): 1) To establish a pig model of combined hemorrhagic shock and closed head injury, a combination common to both the battlefield and the emergency room.

- 2) To determine the effect on ICP and cerebral metabolism of using hemodynamic markers (BP, CVP, PAOP) as end points of fluid resuscitation in shock.
- 3) To compare the effects of fluid resuscitation with different solutions (whole blood, hetastarch, normal saline, and hypertonic saline) on ICP, intracranial compliance and cerebral metabolsim in hemorrhagic shock with epidural mass.

Technical Approach: Following induction of adequate anesthesia, bilateral twist drill holes will be placed in the temporo-parietal regions of the skull. A Fogarty balloon catheter will be placed in the right parietal epidural space and an ICP monitor inserted through the left twis drill hole into the subarachnoid space. Baseline ICP and arterial pressure will be obtained. A pressure-volume curve will be generated utilizing the epidural balloon catheter (EBC). The inflection point (Pi) of this curve will be determined and recorded.

Progress: This study has been placed on hold temporarily. Experiments will resume in the near future.

Date: 29 Sep 89 Pro	J NO: A-1-00 Status: Ungoing
Title: The Effect of Lysine on S	ubstance P in Guinea Pigs
Start Date 2 Dec 88	Est Comp Date:
Principal Investigator	Facility
Eleanor Ayala	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Clinical Investigat	
Key Words:	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost: 1958.00
Number of Subjects Enrolled Durin	g Reporting Period:
Total Number of Subjects Enrolled	to Date:
Date of Periodic Review	Results
Objective(s): To evaluate the in	vivo effect of topical applications of L-

Technical Approach: As outlined in the protocol. Male Hartley guinea pigs have teen treated. Three days post treatment, clasue biopsies of inoculated sites and dorsal root ganglia (DRG) have been collected from each animal for immuno-histochemical detection of substance P (SP) with a Biotin-strep avidin tagged monoclonal antibody to SP.

lysine on substance P in guinea pigs.

The method of Tuchschere and Seybold for the sectioning of tissue on the microtome was used. However, because it is difficult to recover 100% of the sectioned tissue and, because there appeared to be an uneven distribution of neurons in the kidney shaped DRG, an examination of every third tissue section was not an option.

Progress: The collection and processing of skin biopsies and dorsal root ganglia (Cl-Sl) have been completed. The data are being analyzed. The results may require confirmation of differences with the use of isolated cells.

Date:	27 Sep 89	Proj No: A-3-88	Status: Ongoing
Title:	Evaluation	of Uncemented Canine Hip Prosthesis	

Start Date 17 Feb 88	Est Comp Date:
Principal Investigator	Facility
Allan L. Bucknell, COL, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/Orthopaedic	William Ehler, D.V.M., Wilford Hall
Key Words:	Arnold Penix, MAJ, USAF MC
-	David L. Danley, MAJ, MS
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
	Daniel Daniel 1
Number of Subjects Enrolled During	Reporting Period: 1
Number of Subjects Enrolled During Total Number of Subjects Enrolled	

Objective(s): To develop and refine the techniques of uncemented hip arthroplasty in dogs and evaluate the remodelling of bone around the femoral stem of a titanium prosthesis.

Technical Approach: As outlined in the Company protocol.

Progress: We have had great difficulty in securing 70 kg dogs, but expect to do two more cases in this pilot study.

Date: 29 Sep 89 Proj No: A-4-88 Status: Ongoing Title: A Conscious Baboon (Papio anubis) Model to Study Ventricular Pressure-Volume Relations and Ventricular/Vascular Coupling in Altered Gravitational Environments.

Start Date 14 Apr 88	Est Comp Date:		
Principal Investigator	Facility		
Ricky D. Latham, MAJ, MC	Brooke Army Medical Center		
Dept/Svc	Associate Investigators:		
Department of Clinical Investigation	James R. Hickman, COL, USAF MC		
Key Words:	Bernard J. Rubal, Ph.D.		
•	Paul Celio, M.D.		
	Curtis White		
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During Repo	orting Period: 4		
Total Number of Subjects Enrolled to Da	ite: 4		
Date of Periodic Review	Results		

Objective(s): 1) Develop a conscious, tethered or lightly sedated, nonhuman primate model conducive to the study of ventricular/vascular hemodynamics using inductance telemetry in flight.

- 2) Describe ventricular pressure-volume relations and ventricular/vascular coupling supine (zero Gz, Igx) upright (IGz, zero Gx), IGz environments and in microgravity or zero G environments.
- 2) Assess hemodynamic responses to a high flow, computer-driven pulsatile fluid filled anti-G suit with standard G-gated pulsations vs ECG-gated pulsations.

Technical Approach: Transducers will be applied via thoracotomy. Initial animals will use exteriorized cables. Animals will be trained to accept the tilt table. Pressure flow and crystal cimensions will be collected and converted real time.

Progress: Protocol to keep leads uninfected established. Equipment and four cull animals have been performed. Awaiting arrival of transducers to operaton on the fifth animal and first data animal.

	6 Sep			Proj No: A-5						
Title:	Use of	a Swine	Model	for Evaluation	n and	Training	with	the	OHME DA	PAC
Vaporiz	er (Drav	w-over A	nesthes	sia Device)						

Start Date 9 May 88	Est Comp Date:		
Principal Investigator	Facility		
Charles P. Kingsley, MAJ, MC	Brooke Army Medical Center		
Dept/Svc	Associate Investigators:		
Department of Surgery/Anesthesiology	Kevin Olson, CPT, MC		
Key Words:	Richard Peterson, CPT, MC		
	Donald Fox, CPT, MC		
	Emil J. Menk, MAJ, MC		
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During Rep			
Total Number of Subjects Enrolled to D	<u> </u>		
Date of Periodic Review	Results		

Objective(s): 1) To gain experience with the use of this anesthesia delivery system in swine model and acquire physiological data that would be useful in anticipating its performance in human patients.

2) To provide on-going training and familiarization to military anesthesiologists and anesthetists with anesthesia equipment designed for the field environment.

Technical Approach: Swine are randomized to receive halothane, isoflurane, or ethrane using a PAC vaporizer. Anesthetic is provided in increasing concentration with end tidal oxygen, carbon dioxide, and agent concentration recorded at each level. Pulse oximetry and respiratory volumes are monitored, and arterial blood samples are analyzed.

Progress: Study initially completed. Upon evaluation of data, it was determined that the devices need to be recalibrated. The study will resume when this has been done.

Date: 6 Sep 89 Proj No: A-6-88 Status: Ongoing
Title: Use of a Swine Model for Evaluation and Training with the PENLON
Vaporizer (Draw-over Anesthesia Device)

Start Date 9 May 88	Est Comp Date:	
Principal Investigator	Facility	
Charles P. Kingsley, MAJ, MC	Brooke Army Medical Center	
Dept/Svc	Associate Investigators:	
Department of Surgery/Anesthesiology	Kevin Olson, CPT, MC	
Key Words:	Richard Peterson, CPT, MC	
	Donald Fox, CPT, MC	
	Emil J. Menk, MAJ, MC	
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost:	
Number of Subjects Enrolled During Re	porting Period:	
Total Number of Subjects Enrolled to	· · · · · · · · · · · · · · · · · · ·	
Date of Periodic Review Results		

Objective(s): 1) To gain experience with the use of this anesthesia delivery system in swine model and acquire physiological data that would be useful in anticipating its performance in human patients.

2) To provide on-going training and familiarization to military anesthesiologists and anesthetists with anesthesia equipment designed for the field environment.

Technical Approach: We will utilize the same approach as outlined in A-5-88.

Progress: Two animals have been evaluated. It is too early to report any meaningful results.

Date: 25 Sep 89 Proj No:	A-7-88 Status: Completed
Title: Evaluation of Chemexfoliation	on Surgical Skin Flaps
Start Date 9 May 88	Est Comp Date:
Principal Investigator	Facility
David D. Hayes, MAJ, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/Otolaryngology	Kweon I. Stambaugh, LTC, MC
Key Words:	
	<u> </u>
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	~ ~
Total Number of Subjects Enrolled to D	ate:
Date of Periodic Review	Results
Objective(s): To evaluate the effect	of simultaneous chemexfoliation on the
viability of a broad-based skin flap.	

Technical Approach: Each of the guinea pigs has had a broad-based random skin flap created. Half had only the flap and half had both the flap as well as chemexfoliation. The animals were anesthetized and punch biopsies taken at regular intervals.

Progress: Addition of chemical peel to acutely raised skin flap caused an overall greater skin flap loss.

Date: 29 Sep 89 Proj N	o: A-8-88 Status: Terminated
Title: Magnesium and Calcium Intera	ction in the Rat Cardiovascular System
Start Date 1 Sep 88	Est Comp Date:
Principal Investigator	Facility
John A. Ward, Ph.D.	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Clinical Investigation	Linda Koehler, MA, MT
Key Words:	Gene V. Hubbard, D.V.M.
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During R	<u> </u>
Total Number of Subjects Enrolled to	• • • • • • • • • • • • • • • • • • • •
Date of Periodic Review	Results

Objective(s): To determine the effect of the Ca/Mg ratio in magnesium deficiency on the function of vascular smooth muscle, contraction will be studied by measuring tension vs. Ca⁺⁺ curves for the abdominal aorta in five groups of rats: 1) magnesium sufficient, 2) magnesium deficient, 3) magnesium deficient, calcium excess, 4) magnesium deficient, calcium deficient, and 5) lab chow.

To determine the effect of Ca/Mg ratio in magnesium deficiency on the hemodynamics of an isolated vascular bed. Hemodynamic alterations will be studied by measuring pressure-flow vs. Ca++ curves in five groups of rats as above.

Technical Approach: All animal studies will be conducted at Incarnate Word College Division of Nursing and the Sciences. All procedures will be done as outlined in the study protocol.

Progress: This study was terminated due to inability to obtain the needed funding.

Date:	29 Sep 89		Pro	j No:	A-1-89		Status	: Termina	
Title:	Peirpheral	Resistance	and	Aortic	Compliance	in	Magnesium	Deficient	Rats

Start Date 6 Dec 88	Est Comp Date:
Principal Investigator	Facility
John A. Ward, Ph.D.	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Clinical Investigation	Gene V. Hubbard, D.V.M.
Key Words:	Linda Koehler, MA
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Repo	orting Period:
Total Number of Subjects Enrolled to Da	
Date of Periodic Review	Results

Objective(s): 1) To develop interactive software for fitting aortic pressure and flow measurements to a 3 element Windkessel model of the systemic arterial tree, nonsteady-state data obtained from an electrical analog will be obtained and analyzed.

2) To determine the effect of magnesium deficiency on peripheral resistance and arterial compliance, hemodynamic transients in pressure and flow will be obtained by acutely changing heart rate in control and magnesium deficient rats.

Technical Approach: The application model during pressure transients will be tested in an electrical analog of the heart and the 3 element Windkessel. "Left ventricular pressure" will be generated by a waveform generator, a source impedance and a diode as the "aotic valve". Four cycles will be selected from the measured sequence. Analysis will be performed on an IBM-AT microcomputer.

Male Sprague-Dawley rats will be divided into three groups. One group will be placed on a lab chow diet, one on an MgS diet and one on an MgD diet. The remained of the study will be conducted as outlined in the study protocol.

Progress: Software was developed for fitting a three-element Windkessel model to aortic pressure and flow recordings. However, the study was terminated due to inability to obtain funding to conduct the necessary animal studies. The software will be used to support other protocols.

	Proj No: A-2-89	Status: Ongoing			
Title: Comparison of Intraver	nous Antivenin vs Joint	Irrigation in Treating			
Intra-articular Crotalus Atrox Venom Poisoning in a Rabbit Model					
Start Date 6 Dec 88	Est Comp Dat	e:			
Principal Investigator	Facility				
Robert L. Norris, Jr., MAJ, MC		Medical Center			
Dept/Svc	Associate In				
Department of Emergency Medici	ine William Ehle	r, D.V.M.			
Key Words:		erberg, MAJ, VC			
Accumulative MEDCASE	Est Accumula	tive			
Cost:	OMA Cost:				
Number of Subjects Enrolled Du	ring Reporting Period:				
Total Number of Subjects Enrol	lled to Date:				
Date of Periodic Review	Resu	lts			
		· · · · · · · · · · · · · · · · · · ·			

Objective(s): To compare the degree of protection for articular cartilage and synovial membrane following intraarticular (IA) injection of <u>C. atrox</u> venom in a rabbit model using: (1) intravenously administered antivenin alone; (2) joint irrigation with normal saline alone; (3) intravneous antivenin combined with joint irrigation.

Technical Approach: As outlined in the study protocol.

Progress: None due to inability to go to Wilford Hall to conduct study.

Date:	27 Sep 89	Proj No: A-3-89	Status:	Ongoing
Title:	Evaluation	of Bone and Associated Soft Tissue	Responses to a	Resorbable
Polymer	Implant in	Iatrogenic Proximal Tibial Fracture	s in Goats: A	A Pilot Study

Start Date 6 Dec 89	Est Comp Date:	
Principal Investigator	Facility	
Allan L. Bucknell, COL, MC	Brooke Army Medical Center	
Dept/Svc	Associate Investigators:	
Department of Surgery/Orthopaedics	Stephen J. Peoples, D.V.M.	
Key Words:	George D. Harrington, MAJ, MC	
•	R. Marvin Royster, MAJ, USAF MC	
	John H. Cissik, COL, USAF BSC	
	William Ehler, D.V.M.	
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost:	
Number of Subjects Enrolled During Re	eporting Period:	
Total Number of Subjects Enrolled to	Date:	
Date of Periodic Review	Results	

Objective(s): To evaluate the fracture healing and general tissues responses to a resorbable polymer intramedullary implant in goats.

Technical Approach: The study will include an experimental group, composed of unilateral iatrogenic proximal tibial fractures with an intramedullary implant of the resorbable polymer, and a control group, composed of the same iatrogenic fracture but without the polymer implant. All fractures, experimental and control, will be stabilized by external casing. The responses of the bone and associated soft tissue and polymer degradation will be evaluated at three postoperative intervals.

Progress: Obtaining protocol approval via USAF has not been achieved.

Status: Terminated

Proj No: A-4-89

Date: 12 Oct 89

and fat in pigs.

Title: Capillary Blood Supply to the F	Fascia and Fat in Pigs		
Start Date 6 Dec 89	Est Comp Date:		
Principal Investigator	Facility		
Julio E. Ortiz, COL, MC	Brooke Army Medical Center		
Dept/Svc	Associate Investigators:		
Department of Surgery/Plastic Surgery			
Key Words:			
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During Repo	orting Period:		
Total Number of Subjects Enrolled to Da	ate:		
Date of Periodic Review	Results		
Objective(s): To ascertain the different	ence in capillary blood supply to fascia		

Technical Approach: The study has been divided into two parts - Part I to establish the animal burn model and Part II anatomic and histologic analysis of fat and fascial circulation. Yucatan (hairless) pigs weighing approximately 15 kg will be utilized for establishing the burn model. After this has been determined, pigs will be anesthetized and undergo full thickness burns. Eschar will be removed at days 5, 10, 30, 40, 50, and 60 and biopsies of fat and underlying fascia obtained. Histologic analysis of all specimens will be performed and the number of blood vessels noted. At the end of two mothsh animals will be eutha-

Progress: Study terminated due to PCS of principal investigator.

nized and complete necropsy performed.

Date: 12 Oct 89	Proj No: A-5-89	Status: Completed
Title: A Comparison of the	Electrophysiologic Effect	s of Small Volume Resusci-
tation with 7.5% NaCl in 7%	Dextran-70 (HSD) with Sta	ındard Resuscitation
Following Hemorrhage		
Start Date 27 Jan 89	Est Comp Date):
Principal Investigator (vice	Ducey) Facility	
James M. Lamiell, LTC, MC	Brooke Army M	Medical Center
Dept/Svc	Associate Inv	vestigators:
Department of Surgery/SICU	Glen E. Guell	er, SFC
Key Words:		
Accumulative MEDCASE	Est Accumulat	ive
Cost:	OMA Cost:	
Number of Subjects Enrolled	During Reporting Period:	
Total Number of Subjects Eng		
Dare of Periodic Review	Resu	lts
Objective(s): To ascertain cerebral resuscitation follo		

Technical Approach: Nineteen animals are the subject of this study. Each was anesthetized with ketamine, 22 mg/kg IM, and Xylazine, 0.44 mg/kg IM. Solutions of 6T NaCl (HS), 0.9% NaCl (NS), 6% hetastarch (HE), and whole blood (WB) were used to resuscitate swine in hemorrhagic shock(MAP <30 mmHg). The endpoint of resuscitation was normal oxygen delivery (DO₂). Measurements of intracranial pressure (ICP), cerebral perfusion pressure (CPP), and intracranial elastance (ICE) were made in the absence and presence of an epidural mass, created by inflating an epidural balloon.

Progress: HS resuscitation resulted in a lower ICP (5+1 vs. 9+2 (HE), 17+3 (NS), and 10+3 (WB) mmHg; p = .016), and normalization of CPP throughout resuscitation. NS decreased CPP by the end of resuscitation (CPP = 45+4 for NS group, vs. 63+4 (HE), 66+4 (HS), and 6+3 (WB) mmHg; p = .009). ICE fell markedly in the HS group, (a decrease of 12+2 vs. a rise of 5+3 (HE), 2+3 (NS), and 6+3 (WB) mmHg/ml; p = .0005). This improvement was even more dramatic in the presence of an epidural mass (a fall of 21+3 vs. no change (HE, WB) and a rise 4+3 (NS) mmHg/ml; *p = .0005). For hemorrhage accompanied by severe head injury, resuscitation with HS may benefit victims by decreasing ICP and diminishing the effects of intracranial mass.

Date: 18 Sep 89 Proj No	Status: Terminated			
Title: Adaptation of Ventricular/Vas	cular Coupling and Arterial Dynamics to			
Weightlessness in Macaca mulatta				
Start Date 10 Feb 89	Est Comp Date:			
Principal Investigator	Facility			
Ricky D. Latham, MAJ, MC	Brooke Army Medical Center			
Dept/Svc	Associate Investigators:			
Department of Clinical Investigation	Barclay Butler, CPT, MS			
Key Words:	John A. Ward, Ph.D.			
	Bernard J. Rubal, Ph.D.			
	·			
Accumulative MEDCASE	Est Accumulative			
Cost:	OMA Cost:			
Number of Subjects Enrolled During Reporting Period:				
Total Number of Subjects Enrolled to	Date:			
Date of Periodic Review	Results			

Objective(s): 1) To validate reliability of a combination transducer cuff utilizing a high-fidelity pressure cell and a continuous wave doppler flow probe on the proximal aorta.

2) To evaluate ventricular performance pre-, during and post-flight using direct measurements of stroke volume, peripheral resistance, heart rate, and cardiac output.

Technical Approach: As outlined in the study protocol.

Progress: The study was terminated due to failure to obtain the necessary funding.

A - 7 - 89

Status:

Ongoin

Proi No:

Date:

18 Sep 89

Title: Histopathologic Features of	f Buried Vaginal Epithelium in the Rabbit
Start Date 21 Feb 89	Est Comp Date:
Principal Investigator	Facility
Eric J. Zeidman, MAJ, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/Urology_	
Key Words:	
	ı

Accumulative MEDCASE

Cost:

OMA Cost:

Number of Subjects Enrolled During Reporting Period:

Total Number of Subjects Enrolled to Date:

Date of Periodic Review

Results

Objective(s): 1) To develop an animal model for buried vaginal epithelium and transcutaneous incorporation of nonabsorbable monofilament suture.

2) To objectively demonstrate the fate of buried vaginal epithelium and incorporated nonabsorbable monofilament suture.

Technical Approach: Nonabsorbable monofilament suture will be placed in a helical fashion through vaginal wall on both sides of the vagina. The ends of the suture will then be passed underneath the vaginal wll and anchored to the ipsilateral abdominal wall under mild tension. One suture will be placed on each side. A vaginal flap will be constructed on one side of the vagina and brought over the top of the helical vaginal suture already created. This buried vaginal epithelium and nonabsorbable monofilament suture knot will serve as the study specimen.

Progress: During the performance of the protocol, it was determine that the flaps created were tearing apart so that no vaginal epithelium was remaining buried as planned. It was additionally discovered that a layer of tissue never before described exists in the submucosa of the urogenital sinus of the rabbit. Because the original question posed in the project remains unaswered, the protocol has been amended. The flap technique used on the first set of rabbits has been modified to ensure that the flap remains intact for the duration of the study.

Date: 12 Oct 89 Proj No:	A-8-89 Status: Ongoing
Title: The Effect of Low Dose Dopamine	on Renal Blood Flow Following Prolonged
Renal Ischemia	
Start Date 28 Feb 89	Est Comp Date:
Principal Investigator (vice Ducey)	Facility
James M. Lamiell, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/SICU	Glen E. Gueller, SFC
Key Words:	Joseph P. Ducey, MAJ, MC
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Repo	rting Period:
Total Number of Subjects Enrolled to Da	te:
Date of Periodic Review	Results
Objective(s): To determine the efficac	y of low dose dopamine in enhancing renal
blood flow (RBF) following unilateral r	

Technical Approach: RBF will be measured bilaterally throughout the study. Renal artery occlusion for 30 minutes will be achieved unilaterally using an hydraulic occluder. Animals will be divided into two groups. In Group A, dopamine will be infused at 2 micrograms/kg/min and RBF measured again, comparing the effect of dopamine on the normal and the post-ischemic kidney. Group B will receive D5W placebo. Cardiac output (CO) will be measured continuously using an aortic root probe so that RBF can be expressed as a percentage of CO as well as an absolute flow rate (ml/min). Hepatic artery flow also will be measured as a separate marker of DAS effect on splanchnic flow. Post-ischemic RBF will be compared between Groups A and B in terms of absolute flow and as a proent of CO. Left and right renal inulin clearance will be measured at baseline and after renal artery occlusion. Total clearance before and after occlusion will be compared as will relative clearance of the left and right kidneys.

Progress: Two rabbit cadavers were obtained and dissected to achieve expertise in the required dissection. Additionally, three rabbits have been anesthetized and the required procedures performed to standardize the animal model. Data accumulation will start in the near future.

Date: 18 Sep 89	Proj No: A-9-89	Status: Ongoing
Title: Cardiac Response to Se		ng
Start Date 5 May 89	Est Comp Date:	
Principal Investigator	Facility	
John A. Ward, Ph.D.	Brooke Army Me	dical Center
Dept/Svc	Associate Inve	stigators:
Department of Clinical Invstig	gation Eleanor A. You	ing, Ph.D., UTHSC-SA
Key Words:	· · · · · · · · · · · · · · · · · · ·	
-		
manufacture and the second of		
Accumulative MEDCASE	Est Accumulati	.ve
Cost:	OMA Cost:	
Number of Subjects Enrolled Du	ring Reporting Period:	
Total Number of Subjects Enrol	led to Date:	
Date of Periodic Review	Result	
Objective(c): IV To particin	ata in a comprehensive o	tudu of the effect of Ci

Objective(s): 1) To participate in a comprehensive study of the effect of SS and RF on the gastrointestinal tract and the heart that will include measurement of cardiac Ca, K, P, Zn, Cu and Mg concentrations, histology of cardiac tissue, and detailed analysis of cardiac ultrastructure by electron microscopy.

- 2) To study semistarvation (SS) and subsequent refeeding (RF) in a systemic, controlled animal mode. the rat.
- 3) To monitor cardiac function serially by screening electrocardiograms for arrhythmias.

Technical Approach:

Progress: Funding has been obtained from the National Institutes of Health. A technician has been trained in the technique for recording electrocardiograms from rats. Data collection began on 14 August 1989 in the laboratory of Dr. Eleanor A. Young.

Date: 28 Sep 89 Proj No:	A-10-89 Status: Ongoing
Title: Flow Cytometric Analysis of Gu	
Start Date 5 May 89	Est Comp Date:
Principal Investigator	Facility
Eleanor Ayala, MT	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Clinical Investigation	Janice Grassel, MT
Key Words:	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost: 942.45
Number of Subjects Enrolled During Rep	orting Period:
Total Number of Subjects Enrolled to D	ate:
Date of Periodic Review	Results

Objective(s): To analyze guinea pig dorsal root ganglia cell populations on the basis of cell size, cytology, and peptide immunoreactivities by flow cytometric technique and to determine the distribution of substance P immunoreactive cells in the doral root ganglia of the guinea pig.

Technical Approach: The study will contain two parts. The first part will consist of experiments to characterize the DRG neuronal cell populations of the normal untreated GP by flow cytometric analysis and establish norms for that technique. The second set of experiments will characterize, by flow cytometric analysis, the DRG neuronal cell populations of the lysine treated GP for comparison with corresponding DRG C1-S1 of the controls. Chracterization of the DRG neuronal cell population at the various segmental levels will include determination of the percent populations of large, intermediate, and small cells and the biochemical contents of the cells.

Progress: Experiments to characterize the DRG cell populations of normal untreated GP have been initiated. DRGs from six GP have been collected, weighed, digested and fixed, or fixed and digested. Total numbers of cells from each of 348 DRGs have been counted manually and on the Coulter ZM. Since the Coulter ZM also gives the cell diameters that data was collected on the ZM channelyzer. Several samples have been run through the flow cytometer. The data is being analyzed before proceeding from the second set of experiments.

Date: 18 Sep 89 Proj No:	A-11-89 Status: Ongoing
Title: Physiologic, Anesthetic, and Mo Evoked Potentials in a Porcine Model.	echanical Effects on Neurogenic Motor
Start Date 12 Jun 89	Est Comp Date:
Principal Investigator	Facility
Luke Short, CPT, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/Anesthesiology	Richard E. Peterson, CPT, MC
Key Words:	7
Accumulative MEDCASE	Est Accumulative
	· No. of the control
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	<u> </u>
Total Number of Subjects Enrolled to D	
Date of Periodic Review	Results
Objection (a) To determine the effect	a of individual absolution factors
Objective(s): To determine the effect	· · · · · · · · · · · · · · · · · · ·
(hypercarbia, hypocarbia, hypotension,	and hypothermia) on the latency and

Technical Approach: Each pig will be anesthetized with IV ketamine. A 30 minute time interval will be allowed for steady state to be achieved. Monitoring will include capnography, pulse oximetry, ECG, rectal temperature, arterial blood gases, and transduced pressures of the femoral artery, pulmonary artery and central venous pressure.

amplitude of Neurogenic MOtor Evoked Potentials (NMEP's).

Progress: After four early trials we have had excellent technical results in obtaining response (NMEP). There seems to be little change in NMEP with changes in PCO₂. With severe hypotension 30 MAP there is a slight decrease in amplitude and increase in latency. Hypothermia <32°C causes abrupt and marked changes in amplitude/latency. The next phase will evaluate anesthetic agents and their effect on NMEPs.

Date: 18 Sep 89	Proj No: A-12-89	Status: Ongoing
Title: Bronchoalveolar	Lavage as a Diagnostic Tool	in Bacterial Pneumonia of
Young Piglets		

Start Date 10 Jul 89	Est Comp Date:
Principal Investigator	Facility
Stephen Inscore, MAJ, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	William Ehler, D.V.M.
Key Words:	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
	OMA Cost:
Cost:	OMA Cost:

Objective(s): To determine whether bronchoalveolar lavage (BAL) can reliably and accurately determine the etiology of acute bacterial pneumonia in young piglets when compared to lung biopsy as well as currently accepted modes of diagnosis.

Technical Approach: Twenty young piglets of either sex will be studied - 10 with and 10 without endotracheal intubation prior to BAL. Each animal will be infected blindly with one of two common bacteria causing acute pneumonia in children and serial chest x-rays taken until a pneumonic infiltrate develops. BAL will be performed using standard procedures in the uninfected, normal lung and then in the infected lung. Collected fluid will be processed in a standard manner and analyzed for total cell number, differential, gram stain and quantitative bacterial cultures.

Progress: This is a new study. No reportable data are available at this time

Date: 25 Sep 89	Proj No:	A-13-89		Stati	us:	Ongoing	_
Title: Effects of Ketamine, Contractility and Function i		_	and	Ethrane	on	Myocardial	_

Start Date 10 Jul 89	Est Comp Date:		
Principal Investigator	Facility		
Sanford Silverman, CPT, MC	Brooke Army Medical Center		
Dept/Svc	Associate Investigators:		
Department of Surgery/Anesthesiology	Charles P. Kingsley, MAJ, MC		
Key Words:			
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During Repo	orting Period:		
Total Number of Subjects Enrolled to Da			
Date of Periodic Review	Results		

Objective(s): A comparison of hemodynamic, myocardial and biochemical effects of anesthetic levels of ketamine, halothane, ethrane, and isoflurane in normovolemic and hypovolemic swine.

Technical Approach: Pressure/diameter loops will be constructed from sonomicrometer data and ventricular pressure recordings. Alterations in contractility as evidenced by changes in end-systolic elastance in response to these anesthetic agents will be described. Both normovolemic and hypovolemic animals will be studied. Biochemical markers of circulatory perfusion, serum lactate levels and catecholamine levels will be studied.

Progress: Experimentation has begun. No data are available at this time.

	Proj No: A-14-89 Status: Ongoing
Title: Study of Feral Domestic	Cats (Felis domestica) for Lyme Spirochetes at
Fort Sam Houston and Camp Bulli	is, Texas
Start Date 10 Jul 89	Est Comp Date:
Principal Investigator	Facility
Zia A. Mehr, MAJ, MS	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Preventive Medicine Service	, "
Key Words:	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled Dur	ring Reporting Period:
Total Number of Subjects Enroll	led to Date:
Date of Periodic Review	Results
	
Objective(s): To evaluate the	august and astantial threat of Toma diagram

Objective(s): To evaluate the current and potential threat of Lyme disease in relation to feral domestic cats and fleas at FSH and Camp Bullis, TX.

Technical Approach: Blood was drawn and fleas were collected from the stray feral cats which were held for the required three days. Collected specimens were submitted to the Bureau of Laboratories, Texas Department of Health, Austin, TX. Blood specimens were examined for the presence of Borrelia burgdorferi; Rickettsia of Borrelia burgdorferi and Rickettsia typhi.

Progress: To date 18 feral domestic cats were examined. Three cats were found with high titer for Lyme spirochete 1:128; 1:128; and 1:256. From fleas examined none were found to be infective with Borrelia burgdorferi or Rickettsia typhi.

Proj No:

T-4-82

Status:

Terminated

2 Dec 88

Date:

Start Date 19 May 83	Est Comp Date:
Principal Investigator (vice Parry)	Facility
Richard T. Takao, COL, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
	<u> </u>
	Est Accumulative
ccumulative MEDCASE	
ost;	OMA Cost:
ost: umber of Subjects Enrolled During Rep	porting Period:
ost;	porting Period:

Objective(s): To allow practice in recognition and prompt appropriate response to a neonate with life-threatening pneumothorax.

Technical Approach: Following demonstration of chest tube insertion by the instructor, subsequent practice is carried out by the students. Insertion of appropriate sized chest tubes is carried out after the instructor has discussed methods, sites and complications of chest tube insertion.

A new protocol is being prepared and will be submitted in the near future.

Progress: This study was terminated due to failure to submit a revised protocol.

T-5-82

Status:

Terminated

Proi No:

2 Dec 88

Date:

Start Date 23 Jun 82	Est Comp Date:
Principal Investigator (vice Parry	y) Facility
Richard T. Takao, COL, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	Howard S. Heiman, MAJ, MC
Key Words:	John B. Woodall, COL, MC
acy mulus.	Joun B. Woodail, Col, MC
ncy words.	Jodn B. Woodall, COL, AC
Accumulative MEDCASE	Est Accumulative OMA Cost:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Accumulative MEDCASE Cost: Number of Subjects Enrolled During Total Number of Subjects Enrolled	Est Accumulative OMA Cost: g Reporting Period:

Technical Approach: Intubation technique is demonstrated and supervised by the

This study is being revised and will be submitted in the near future.

instructor as outlined in the training protocol.

Progress: This study was terminated due to failure to submit revised protocol.

Date: 2 Oct 89 Proj No:	
Title: Utilization of Goats for Traini	ng Special Forces Aidman
Start Date 1 Feb 85	Est Comp Date:
Principal Investigator (vice Matthews)	Facility
David L. Rubla, CPT, VC	Special Forces School, Fort Bragg, NC
Dept/Svc	Associate Investigators:
Department of	
Key Words:	
A	Est Accumulative
Accumulative MEDCASE	OMA Cost:
Cost:	
Number of Subjects Enrolled During Repo	
Total Number of Subjects Enrolled to Da	
Date of Periodic Review 31 Jan 89	Results Continue
	1 1 5
_	the special forces aidman in the care of
high velocity ballistic wounds.	

Technical Approach: Training is conducted as outlined in the study protocol. Approximately 200 animals are used per class with approximately two thousand goats used annually.

Progress: During this period 160 studies were trained.

Date: 18 Sep 89	Proj No: T-7-86	Status: Ongoing
Title: Mouse Inoculation Tes	t (MI) - Rabies Diagnosis	3
Start Date 4 Apr 86	Est Comp Date:	
Principal Investigator	Facility	
Daniel Guerrero	Brooke Army Me	edical Center
Dept/Svc	Associate Inve	estigators:
Department of Pathology		
Key Words:		
	,	
	1	
Accumulative MEDCASE	Est Accumulati	ive
Cost:	OMA Cost:	
Number of Subjects Enrolled D	Ouring Reporting Period:	
Total Number of Subjects Enro	lled to Date:	
Date of Periodic Review	Result	ts
Objective(s): To establish a	nd maintain a standing pr	cocedure for the MI test a
a means of diagnosis for rabi		
fluorescent rabies antibody (
110101000, (11117 0000	

Technical Approach: As outlined in the training protocol.

Progress: Approximately 265 mice were utilized during FY 89 for MIC testing.

Date: 12 Oct 89 P	roj No:	T-3-86	Status:	Terminated
Title: Urologic Microsurgery -	A Train	ing Protocol		
		•		
Start Date 6 Feb 86		Est Comp Da	te:	
Principal Investigator (vice Th	ompson)	Facility		
Eric J. Zeidman, MAJ, MC	o-poon,		Medical Center	
Dept/Svc			nvestigators:	
Department of Surgery/Urology		John Norbec	_	
Key Words:			. Rodriguez, COL	, MC
		Theopolis P	eace, COL, VC	•
		Marlene Gai	nes, SGT	
Accumulative MEDCASE		Est Accumul	ative	
Cost:		OMA Cost:		
Number of Subjects Enrolled Dur	ing Repo	orting Period	:	
Total Number of Subjects Enroll	ed to Da	ite:		
Date of Periodic Review 4 Oct	. 89	Res	ults Terminate	
Objective(s): To train Urology surgery.	Resider	its at BAMC t	he techniques us	sed in micro-

Technical Approach: In the first phase, the trainee will learn basic suturing techniques using the operating microscope and a cut rubber glove to imitate tissue. The second phase will teach the techniques of microscopic reanastomosis of the vas deferens. The third phase will teach the technique of microvascular anastomosis.

Progress: Study terminated due to failure to conduct training on a regularly scheduled basis.

Status:

Ongoing

Proj No: T-8-86

Date: 18 Sep 89

Start Date 4 Apr 86	Est Comp Date:
Principal Investigator	Facility
Daniel R. Guerrero	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pathology	
Key Words:	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During 1 Total Number of Subjects Enrolled to	
Date of Periodic Review 31 Jan 89	Results Continue

the fluorescent rabies antibody (FRA) test and to provide a means of confirming that the procedure of directly tagging rabies virus in a brain impression is

Technical Approach: As outlined in the training protocol.

specific and the fluorescent intensity is optimized.

Progress: Approximately 9 mice were utilized during FY 89 for preparing rabies infected and uninfected mouse brain tissue slide impressions.

T-9-86

Status:

Ongoing

Proj No:

Date: 27 Sep 89

Start Date 29 Apr 86	Est Comp Date:
Principal Investigator	Facility
Allan L. Bucknell, COL, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/Orthopaedic	
Accumulative MEDCASE	Est Accumulative
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost: 66.30
	OMA Cost: 66.30
Cost:	OMA Cost: 66.30 eporting Period: 50

Objective(s): To train Orthopaedic Residents and maintain Orthopaedic Staff expertise at BAMC in the techniques used in microsurgery.

Technical Approach: The protocol is broken up into four phases. In the first phase, the trainee will learn basic suturing techniques using the operating microscope. The second phase will teach the techniques of microvascular anastomoses of arteries and veins, and vein grafts. The third phase will teach the technique of microneurorrphaphy, and the four phase will teach the technique of ree tissue transfer using microvascular anastomoses.

Progress: Improvement in surgical techniques have been realized, and improvement in patient care has been noted. This skill (microsurgery) is a mission-essential skin for orthopaedic surgeons.

Date: 29 Sep 89 Proj No: T-10-86 Status: Ongoing
Title: Supervised Basic Abdominal and Vascular Surgical Experience

Start Date 29 Apr 86	Est Comp Date:
Principal Investigator(vice Rosenthal)	Facility
Michael J. Walters, COL, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/General Surgery	Robert Solenberger, MAJ, MC
Key Words:	
Accumulative MEDCASE	Est Accumulative
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost: 910.00

Objective(s): 1) To provide basic proficiency to junior housestaff in the handling of the GI and vascular systems before actually operating on humans.

- 2) To increase the proficiency of more senior surgeons in the performance of seldom performed procedures, so as not to lose their skills.
- 3) To learn new techniques and operations on animals before starting to use them on humans.

Technical Approach: Training is conducted as outlined in the protocol.

Progress: Training of 6 residents is conducted bi-monthly.

Date: 29 Sep 89 Pro	j No: T-11-86 Status: Ongoing	
Title: Microsurgery Training Prot	tocol for Plastic Surgery Staff, Residents	and
Rotators.		
Start Date 29 Apr 86	Est Comp Date:	
Principal Investigator	Facility	
Julio E. Ortiz, COL, MC	Brooke Army Medical Center	
Dept/Svc	Associate Investigators:	
Department of Surgery/Plastic Surg	gery Robert N. Young, LTC, MC	
Key Words:		
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost: 347.00	
Number of Subjects Enrolled During	g Reporting Period:	
Total Number of Subjects Enrolled	to Date:	
Date of Periodic Review	Results	
Objective(s): To familiarize plan	stic surgeons of microsurgical procedures	with
	d microsurgical instruments, and technique	
microsurgery.	,,	_

Technical Approach: Training is conducted as outlined in the study protocol.

Progress: Training continues on a regularly scheduled basis.

Date: 12 Oct 89	Proj No:	T-12-86	Status:	Terminated
Title: Urology Surgical Train	ing Proto	ocol		
			•	
Start Date 29 Apr 86		Est Comp Da	te:	
Principal Investigator		Facility		
Francisco R. Rodriguez, COL, N	1C	Brooke Army	Medical Center	
Dept/Svc			nvestigators:	
Department of Surgery/Urology		Ian M. Thom	pson, MAJ, MC	
Key Words:		Eric S. Zei	dman, MAJ, MC	
Accumulative MEDCASE		Est Accumul.		
Cost:		OMA Cost: 1	,750.00	
Number of Subjects Enrolled Du	iring Repo	orting Period	:	
Total Number of Subjects Euro	lled to Da	ate:		
Date of Periodic Review 4 (ults Terminate	
Objective(s): To improve the	technical	l skills of U	rology Service 1	esidents in

Objective(s): To improve the technical skills of Urology Service residents in performing procedures essential to the specialty of Urology.

Technical Approach: As outlined in the training protocol.

Progress: Study terminated due to failure to conduct training on a bi-monthly basis.

	No: 1-13-86 Status: Ongoing
Title: Swine Model for Technical P Residents	rocedure Training of Emergency Medicine
kesidents	
Start Date 29 Apr 86	Est Comp Date:
Principal Investigator	Facility
Carey D. Chisholm, MAJ, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Emergency Medicine	
Key Words:	
·	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost: 2,450.00
Number of Subjects Enrolled During	Reporting Period:
Total Number of Subjects Enrolled t	o Date:
Date of Periodic Review 31 Jan 89	

Objective(s): To develop familiarity and competency in performing life saving technical skills applicable to the Emergency Room environment.

Technical Approach: Training is conducted as outlined in the study protocol.

Progress: Training of residents in frequently used emergency procedures continues on a monthly basis.

	7 Sep 89	Proj No:		Terminated
Title:	Cardiothoracic	Surgery Service	Porcine Surgery	

Start Date 12 Jun 86	Est Comp Date:
Principal Investigator	Facility
Brent A. Grishkin, COL, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/Cardiothoracic	
Key Words:	Richard M. Briggs, MAJ, MC
	1
Accumulative MEDCASE	Est Accumulative
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost: 420.00
	OMA Cost: 420.00
Cost:	OMA Cost: 420.00 porting Period:

Objective(s): 1) To provide operative experience for cardiothoracic and rotating general surgery residents in procedures not generally available in clinical settings.

- 2) To provide practical experience prior to initial human clinical experience.
- 3) To provide experience for clinical perfusion trainee.

Technical Approach: Training is conducted as outlined in the study protocol.

Progress: This protocol was terminated due to failure to conduct training sessions during FY 89.

Date: 15 Sep 89 Proj	No: T-1-87	Status: Ongoing
Title: Military Working Dogs utilgastric tube passage and subcutant masters		
Start Date 19 Nov 86	Est Comp Date	
Principal Investigator	Facility	
George E. Moore, CPT, VC	Academu of Hea	alth Sciences
Dept/Svc	Associate Inve	estigators:
Department of Medicine		
Key Words:		
Accumulative MEDCASE Cost:	Est Accumulation OMA Cost:	ive
Number of Subjects Enrolled During	Reporting Period:	
Total Number of Subjects Enrolled	to Date:	
Date of Periodic Review 31 Jan 89	Result	ts Continue

Objective(s): To familiarize kennel supervisors on treating medical emergencies on military working dogs in the event a veterinarian and/or animal care specialist is not available.

Technical Approach: Training is conducted as outlined in the training protocol.

Progress: Training was conducted on a regularly scheduled basis of eight dogs per month.

Date: 29 Sep 89	Proj No:		Status: Ungoing
Title: Anesthesiology fo	or ANC Officers	Course (6F-66F	7)
Start Date 6 Feb 87		Est Comp Date:	
Principal Investigator		Facility	
Gary Zarr, LTC, AN		Academy of Hea	alth Sciences
Dept/Svc		Associate Inve	
Department of Nursing		Jeff Serogrham, LTC, AN	
Key Words:			•
A MERCACE		Pat Assumilation	
Accumulative MEDCASE		Est Accumulati	ive
Cost:		OMA Cost:	ive
Cost: Number of Subjects Enrol		OMA Cost: rting Period:	ive
Accumulative MEDCASE Cost: Number of Subjects Enrol Total Number of Subjects Date of Periodic Review		OMA Cost: rting Period:	

Technical Approach: Training is conducted as outlined in the study protocol.

Progress: 36 students were trained during FY 89.

	: 1-3-0/ Status: Ongoing	
Sitle: Abdominal Surgical Experience	- Gynecology Service	
Start Date 19 Feb 87	Est Comp Date:	
	Facility	
Principal Investigator	- 1 j	
Clifford Hayslip, LTC, MC	Brooke Army Medical Center	
Dept/Svc	Associate Investigators:	
Department of Obstetrics-Gynecology		
Key Words:	7	
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost: 420.00	
Number of Subjects Enrolled During Re		
Total Number of Subjects Enrolled to	· · ·	
——————————————————————————————————————	Results Continue	
Date of Periodic Review 31 Jan 89		

Technical Approach: Training conducted as outlined in the training protocol.

Progress: Training of 2 residents has been conducted on a regularly scheduled basis. AT present, however, due to scheduling changes within the Dept. of Ob-Gyn, we have been unable to utilize the animal lab for the past 6-8 months. We are currently attempting to reschedule our allotted time so that we may again continue the resident training in the animal lab.

Status:

Ongoing

Proi No: T-4-87

Date: 15 Sep 89

Start Date 2 Mar 87	Est Comp Date:
Principal Investigator (vice Wittich)	Facility
Jesse Moss, Jr., LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Surgery/Otolaryngology	
Key Words:	
Accumulative MEDCASE	Est Accumulative
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Cost:	OMA Cost:
	OMA Cost: porting Period:

Objective(s): 1) To provide hands-on experience to residents in Otolaryngology and Thoracic Surgery, (and possibly general surgery) in the art of rigid endoscopy.

- 2) To ultimately increase the quality of care to our endoscopy patients by decreasing their surgical risks through laboratory training.
- 3) To simulate the scenario of an esophageal or tracheobronchial foreign body, in a live, anesthetized animal, for the purpose of developing endoscopic foreign body removal skills.

Technical Approach: Training conducted as outlined in the protocol.

Progress: There were 62 participants in the course. The course received high marks on the critique sheets, and was truly a successful endeavor. This course is critical to the teaching program and allows us an effective laboratory to teach residents the proper, safe methjod of passing an esophagoscope and bronchoscope and the use of CO₂ laser in the larynx. The course has immeasurable benefits in that proper training in endoscopy surgery prevents the dreaded possible complication of a ruptured esophagus or bronchus and CO₂ laser complication.

	Proj No: T-5-87	Status: Complet	
Title: Utilization of Goats for the Combat Casualty Care Cours		Department Officer	s for
Start Date 13 May 87	Est Comp Date:		
Principal Investigator (vice P.	asch) Facility		
Roy J. Hobbs, CPT, MS	Academy of Heal	h Sciences	
Dept/Svc	Associate Inves	igators:	
Training Division, C-4 Task Fo	rce John Sheffield,	John, SSG	
Key Words:	Rick Somers, LT	c, vc	
Accumulative MEDCASE Cost:	Est Accumulative	·	
Number of Subjects Enrolled Du			
Total Number of Subjects Enrol	<u> </u>		
Date of Periodic Review 31 Ja		Continue	

Objective(s): To provide training in trauma resuscitation.

Technical Approach: Students are trained to do procedures such as cricothyroidotomy, tracheotomy, tube thoracostomy, cardiac repair, aortic cross clamping, venous cutdown, peritoneal lavage, etc. as outlined in the training protocol.

Progress: This study has been replaced by protocol T-1-89.

	o: T-6-87 Status: Ongoing	
Title: Utilization of Goats for the	Training of Physicians and Physician Assis	
tants in the Advanced Trauma Life Su	pport Instructor Course and Warrant Officer	
Candidates in the Military Physician	Assistant (PA) Course	
Start Date 13 May 87	Est Comp Date:	
Principal Investigator (vice Wohler)	Facility	
David A. Roberts, LTC	Academy of Health Sciences	
Dept/Svc	Associate Investigators:	
Medicine and Surgery Division	Richard J. Lowney, CW4	
Key Words:		
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost:	
Number of Subjects Enrolled During R	eporting Period:	
Total Number of Subjects Enrolled to	Date:	
Date of Periodic Review	Results	
Objective(s): To improve trauma man	agement skills of non emergency personnel.	

Technical Approach: Training is conducted as outlined in the protocol.

Progress: During FY 89, 68 PA students and ATLS instructors were trained.

Date: 29 Sep 89	Proj No: T-/-8/	Status: Ongoing
Title: Utilization of Goats : Course	for Training of 91B Medical	NCO for the Medical NCO
Start Date 13 May 87	Est Comp Date:	
Principal Investigator (vice	Pixley) Facility	
Gretchen Mayes, MAJ, AN	Academy of Health	h Sciences
Dept/Svc	Associate Invest	igators:
Combat Medical Specialist Div:	ision Claude Kucinskis	CPT
Key Words:		
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost:	
Number of Subjects Enrolled De		
Total Number of Subjects Enro	<u> </u>	
Date of Periodic Review 31 Ja		Continue
Objective(s): To improve tra	uma management skills of 91	B Medical NCO.

Technical Approach: Training conducted as outlined in the protocol.

Progress: During FY 89, 1278 NCOs completed the course.

Status:

Ongoing

Proi No: T-1-88

Date: 29 Sep 89

Start Date 7 Mar 88	Est Comp Date:	
Principal Investigator	Facility	
Robert A. Mazzoli, MAJ, MC	Brooke Army Medical Center	
Dept/Svc	Associate Investigators:	
Department of Surgery/Ophthalmology	Calvin E. Mein, LTC, MC	
Key Words:	Donald A. Hollsten, LTC, MC	
	Arthur T. Glover, LTC, MC	
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost:	
Number of Subjects Enrolled During Re		
Total Number of Subjects Enrolled to	· · · · · · · · · · · · · · · · · · ·	
Date of Periodic Review 31 Jan 89	Results Continue	

Objective(s): Provide advanced proficiency to members of the Brooke Army Medical Center House Staff in primary repair of oculoplastic wounds, learn new techniques and operations on animals before starting to use them on humans, and apply the principles of oculoplastic closure and management of ocular and oculoplastic trauma.

Technical Approach: Procedures performed include various types and depths of skin surface incisions and wounds, with subsequent closure utilizing flaps, grafts, and Z-plasties.

Progress: Training of ophthalmology residents will be conducted on an annual basis.

Date: 29 Sep 89	Proj No: T-1-89	Status: Ongoing
Title: Utilization of Goats for the Combat Casualty Care Co		al Department Officers
Start Date 27 Jan 89	Est Comp Date:	:
Principal Investigator (vice Ho	obbs) Facility	
Samuel M. Steele, CDR, USN, MC	Academy of Hea	alth Sciences
Dept/Svc	Associate Inve	stigators:
Training Division, JMRTC	William J. Foo	ody, COL, USAF, MC
Key Words:	Roy J. Hobbs,	CPT, USAF
Accumulative MEDCASE Cost:	Est Accumulati	ive
Number of Subjects Enrolled Dur		
Total Number of Subjects Enrol	· · · · ·	
Date of Periodic Review	Result	8
Objective(s): To provide train	ning for gynecologists a	and urologists in abdomi

Technical Approach: This course encompasses a formal 3 day curriculum including the Amercian College of Surgeons' Approved Advanced Trauma Life Support course as well as war surgery specific lectures and abdominal surgical

procedures. Surgical procedures performed during this training course will not include wound debridement as the goats will not be rounded.

surgical procedures.

Progress: 2993 students were trained during FY 89 (2111 - C4 and 382 - C4b).

Date: 29 Sep 89 Proj No:	T-2-89 Status: Ongoing
Title: Utilization of Goats for Train	ing Veterinary Corps Officers, Veterinary
Service Warrant Officers and Veterinary	
Veterinary Service in the Theater of Op	perations Course (VESTO) (6G-F2)
Start Date 27 Jan 89	Est Comp Date:
Principal Investigator (vice Bruestle)	Facility
Robert G. Hicks, LTC, VC	Academy of Health Scineces
Dept/Svc	Associate Investigators:
Veterinary Science Division	<u>]</u>
Key Words:	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	orting Period:
Total Number of Subjects Enrolled to D	ate:
Date of Periodic Review	Results
Objective(s): To train individuals in care of animals for laboratory use, an of euthanized animals following comple	d humane euthanasia with proper disposal

Technical Approach: Classes in the above mentioned objectives will be conducted as outlined in the study protocol.

Progress. 5 veterinary corps officers, 0 veterinary service warrant officers and 14 veterinary service enlisted personnel were trained during FY 89.

	roj No: T-3-89 Status: Ongoir	ag .
Title: Pediatric Intubation Tra	ining Utilizing the Feline Model	
Start Date 15 Sep 89	Est Comp Date:	
Principal Investigator	Facility	
Stephen C. Inscore, MAJ, MC	Brooke Army Medical Center	
Dept/Svc	Associate Investigators:	
Department of Pediatrics		
Key Words:		
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost:	
Number of Subjects Enrolled Duri	ing Reporting Period:	
Total Number of Subjects Enrolle	ed to Date:	
Date of Periodic Review	Results	

Objective(s): To teach physicians and other health care professionals the basic knowledge and endotracheal intubation skills required to resuscitate a neonate (newborn) or infant.

Technical Approach: The laboratory exercises will concentrate on developing the health professional's confidence in establishing an airway. Each individual will be required to intubate a cat employing a laryngoscope and endotracheal tube three times for physicians and one time for nurses or other personnel who are not required to intubate on the job. Two groups of students will be arranged: the first group will attend a didactic in-service on proper use of airway adjuvant and airway contro while the second will attend the Cat Intubation Laboratory. At least one instructor will teach the in-service and at least two instructors wil teach the Cat Intubation laboratory. Anesthesia will be maintained throughout the procedure.

Progress: Training will start in late October or early November.

<u>Date: 30 Oct 89 Proj No: SMOG 7804 Status: Ongoing</u>
Title: Adjuvant Chemotherapy with 5-Fluorouracil, Adriamycin, and Mitomycin-C (FAM) vs Surgery Alone for Patients with Locally Advanced Gastric Adenocarcinoma.

Start Date FY 78	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	- i
Gastric adenocarcinoma	İ
Accumulative MEDCASE	Est Accumulative
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Cost:	OMA Cost:
	i OMA Cost: Reporting Period: 1

Objective(s): To determine the efficacy of adjuvant chemotherapy with 5-FU, Adriamycin and Mitomycin-C (FAM) on the disease-free interval and survival of patients with TNM stage-groups IB, IC, II and III gastric adenocarcinoma compared to potentially curative surgery alone.

Technical Approach: Eligible patients must have localized lesions at least extending into the submucous and involving any of the deeper layers with the maximum allowable penetration into but not through the serosa; localized lesions extending through serosa, with or without direct extension to contiguous structures; a lesion diffusely involving the wall of the stomach with or without metastases to immediately adjacent perigastric nodes or a localized lesion of any depth with metastases to perigastric nodes in the immediate vicinity; a localized or diffuse lesion with metastases to perigastric nodes distant from primary.

Therapy will follow the schema outlined in the study protocol.

Progress: 80 patients have been evaluated for toxicity to FAM. One patient had a fatal cardiac toxicity, 3 patients had Grade 3 cardiac toxicities and two patients experienced Grade 4 thrombocytopenia. The miscellaneous toxicities were moderate pulmonary fibrosis and moderate microangiopathichemolytic anemia.

Proi No:

SW0G 7808

Status:

Ongoing

Date:

30 Oct 89

Start Date FY 1979	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	i
Hodgkin's Disease	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:

Objective(s): 1) To attempt to increase the complete remission rate induced with MOP-BAP alone utilizing involved field radiotherapy in patients with Stages III and IV Hodgkin's disease achieving a PR at the end of 6 cycles of MOP-BAP.

2) To determine if immunotherapy maintenance with levamisole or consolidation with low dose involved field radiotherapy will produce significantly longer remission durations over a no further treatment group when CR has been induced with 6 cycles of MOP-BAP in Stages III and IV Hodgkin's disease.

Technical Approach: Therapy will follow the schema outlined

Progress: This study is closed to new patient accrual. However, it will remain open for followup purposes.

Date: 30 Oct 89 Proj No: SWOG 7827 Status: Ongoing Title: Combined Modality Therapy for Breast Carcinoma, Phase III. Start Date FY 80 Est Comp Date: Principal Investigator: Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Dept/Svc: Associate Investigators: Department of Medicine/Oncology Key Words: Breast Carcinoma Accumulative MEDCASE Est Accumulative Cost: OMA Cost: Number of Subjects Enrolled During Reporting Period: Total Number of Subjects Enrolled to Date: Date of Periodic Review 16 Oct 89 Results Continue

Objective(s): 1. To compare the disease-free interval and recurrence rates in estrogen receptor positive (ER+) premenopausal patients with Stage II disease, using combination chemotherapy alone versus chemotherapy and cophorectomy.

- 2. To compare the disease-free interval and recurrence rates in estrogen receptor positive postmenopausal patients with Stage II disease, using combination chemotherapy plus tamoxifen versus tamoxifen alone versus combination chemotherapy alone.
- 3. To compare the disease-free interval and recurrent rates in all estrogen receptor negative (ER-) patients with Stage II disease using one versus two years of combination chemotherapy.
- 4. To compare the effect of these various adjunctive therapy programs upon the survival patterns of such patients.
- 5. To correlate the ER status with disease-free interval and survival.

Technical Approach: All patients must have had a radical or modified radical mastectomy with histologically proven breast cancer and with one or more pathologically proven axillary nodes. Primary neoplasm and clinically apparent axillary disease must be completely removed. Pretherapy studies must reveal no evidence of metastatic disease or involvement of the other breast. The capy will follow the schema outlined in the study protocol.

Progress: The premenopausal trial should reach its necessary accrual by the end of this year. The postmenopausal trial will be closed as soon as the replacement trial has been activated. A publication describing the results of the ER-negative component to the trial will be done in the next year. This study has been closed to new patient accrual, open for followup purposes only.

<u>Date: 30 Oct 89 Proj No: SWOG 8094 Status: Completed</u>
Title: Radiotherapy With and Without Chemotherapy for Malignant Mesothelioma
Localized to One Hemithorax, Phase III.

Start Date 22 May 81	Est Comp Date:
Principal Investigator: (vice Mills)	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	
Mesothelioma	İ
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	orting Period: 0
Total Number of Subjects Enrolled to D	ate: 6
Date of Periodic Review 16 Oct 89	Results Completed

Objective(s): 1) To evaluate, in a randomized prospective manner, the efficacy of Adriamycin in improving the disease-free interval in patients who will receive hemithoracic radiotherapy for Stage I pleural mesothelioma.

2) To further define prospectively the efficacy of radiotherapy to the involved hemithorax in patients with pleural mesothelioma.

Technical Approach: Eligible patients will have histologically confirmed malignant mesothelioma of the pleural cavity. Patients with measurable disease or evaluable disease as well as those in whom all gross disease has been resected will be eligible.

Therapy will follow the schema outlined in the study protocol.

Progress: There have been two lethal and four life-threatening toxicities of those patients evaluated for radiation therapy toxicities. Six complete and 16 partial responses have been observed from radiation therapy. One patient had life-threatening leukopenia on the Adriamycin arm of the study. At the current rate of accrual and ineligibility.

Date: 30 Oct 89 Proj No:	SMOG 8216/38 Status: Ongoing
	py and Adriamycin for Superficial Bladde
Start Date FY 1985	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words: Cancer, Bladder	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Re Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 89	Date:3
Objective(s): 1) To compare the eff immunotheracy with intravesical adria	

2) To compare the toxicity of topical immunotherapy and chemotherapy.

disease-free interval and two-year recurrence rate.

3) To obtain experience regarding disease-free interval and the recurrence rate in patients who develop tumor recurrence and are then crossed over to the alternative treatment arm.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is closed to new patient accrual, open for followup purposes only.

SWOG 8229

Combined Modality Therapy for Multiple Myeloma, VMCP-VRAP for

Status:

Ongoi na

Proj No:

Date:

Title:

30 Oct 89

Remission Induction Therapy: VMCP + Levamisole vs Sequential Half-Body Radiotherapy + Vincristine-Prednisone for Maintenance or Solidation.		
Evaluation Phase II		
Start Date FY 1983	Est Comp Date:	
Principal Investigator:	Facility:	
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center	
Dept/Svc:	Associate Investigators:	
Department of Medicine/Oncology	_ i	
Key Words:	- i	
Myeloma, multiple	İ	
	İ	

Objective(s): 1) To compare the effectiveness of two intermittent pulse schedules of the chemotherapy combination of Vincristine, Melphalan, Cyclophosphamide and Prednisone (VMCP) plus Vincristine, BCNU, Adriamycin and Prednisone (VBAP) (alternating versus syncopated) for the induction of remissions in previously untreated patients with multiple myeloma.

- 2) For patients proven to achieve remission (at least 75% tumor regression after induction), to compare the value of 12 months of chemoimmunotherapy maintenance, VMCP + Levamisole, versus a consolidation program consisting of sequential half-body radiotherapy along with Vincristine and Prednisone followed by unmaintained remission.
- 3) For patients who only achieve improvement (50%-74% tumor regression) on chemotherapy induction, to determine whether sequential half-body radiotherapy with Vincristine

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is closed to new patient accrual, open for followup purposes only.

Date: 30 Oct 89 Proj No: S	WDG 8294 Status: Ongoing
	y and Biological Parameters in Node
Negative Operable Female Breast Cancer	
Start Date FY 1983	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. 9'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	1
Key Words:	1
Cancar, Breast Node Negative	
	1
	1
	<u> </u>
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	orting Period: 0
Total Number of Subjects Enrolled to D	ate: 33
Date of Periodic Review 16 Oct 89	Results Continue
Objective(s): 1) To assess the impact	t of short-term intensive chemotherapy
with CaFP to prevent disease recurrence	e and prolong survival in N- patients
with any size ER- tumor and N- patient	s with ER+ tumors whose pathological
sime is greater than or equal to 3 cm.	
•	
as in sweeps the impact of surgical p	rocedures, ER status, menopausal status
vad cambe size.	,,,,,,
2) to diverbe as delines referable to	histopathological features of N- tumors
enion are reproducible and assess thei	
sur ival and survival.	
m) To assess the value to CEA in pred	Histing recurrence and survival rates.
The bases one carde to can in prec	into my recurrence and sorvivar races.
(a) To packed the natural history of a	subgroup with N- FR+ small tumors
ay to yourself the november this congress	subgroup with it, the small tumbes.
But I drywnanie Therany will fall	ow the schema outlined in the protocol.
Security pursuant merapy will for	The scheme out theu th the protocot.
this stem in classed to make	patient accrual, open for followup
TO SEE THE SERVICE OF CHOSEN TO REP	pacient accidat, open for fortomop

30 Oct 89

Date:

Proj No: SWOG 8300 Status: Ongoing Title: Treatment of Limited Non-Small Cell Lung Cancer: Radiation vs Radiation plus Chemotherapy (FOMi/CAP), Phase III. Start Date FY 1985 Est Comp Date: Principal Investigator: Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Dept/Svc: Associate Investigators: Department of Medicine/Oncology Key Words: Non-small cell lung cancer

Accumulative MEDCASE Est Accumulative OMA Cost: Cost: Number of Subjects Enrolled During Reporting Period: Total Number of Subjects Enrolled to Date: 10 Date of Periodic Review 16 Oct 89 Results Continue

Objective(s): 1) To compare combination chemotherapy plus radiotherapy to radiotherapy alone for patients with limited, non-small cell lung cancer (NSCLC) in a randomized study with stratification for known important prognostic factors with regard to response rate, response duration and survival duration.

- 2) To determine the toxicity of radiotherapy plus FOMi/CAP relative to radiotherapy alone for patients with limited NSCLC.
- 3) To evaluate the responsiveness of small tumor burdens to FOM1/CAP (i.e., less than metastatic disease).
- 4) To determine the pattern of relapsing disease in each treatment arm and in subgroups of patients determined by histology and response to FOMi/CAP.
- 5) To determine if prophylactic brain irradiation will decrease the chances for brain metastases and influence toxicity or survival.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is closed to new patient accrual, open for followup purposes only.

Date: 30 Oct 89 Proj No:	SWDG 8309 Status: Ongoing
	tation for the Treatment of Non-Hodgkin's
Start Date FY 1988	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	_i
Key Words:	
Lymphoma, Non-Hodgkin's	
Accumulative MEDCASE	Est Accumulative
Cost: OMA Cost:	
Number of Subjects Enrolled During R Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 8	99 Results <u>Continue</u>
	adiation followed by autologous marrow Ith an otherwise poor prognosis for cure in

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is closed to new patient accrual, open for followup purposes only.

Date: 30 Oct 89 Proj No:	SWOG 8312 Status: Ongoing
	oglutethimide/Hydrocortisone in Sequence or
in Combination as Second-Line Endocr	rine therapy of Estrogen Receptor Positive
Metastatic Breast Cancer, Phase III.	•
•	
Start Date FY 1984	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Breast cancer	Ì
	i
	i
	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During I	
Total Number of Subjects Enrolled to	
Date of Periodic Review16 Oct 1	
DAGE OF THE TOURS TO OCCU	oo noseros <u>constitue</u>

Objective(s): 1) To determine whether combination hormonal therapy with Aminoglutethimide and Hydrocortisone (AH) plus Megestrol Acetate (M), agents thought to have different mechanisms of action, offers an improved response rate with prolonged response duration and increased patient survival over the sequential use of each agent in Estrogen Receptor (ER) positive patients who have progressed after responding to primary hormonal treatment with tamoxifen.

- 2) To assess the relative toxicities of Megestrol Acetate and medical adrenalectomy.
- 3) To assess the value of progesterone receptor (PgR) in predicting subsequent responses to a variety of hormonal therapies.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is closed to new patient accrual, open for followup purposes only.

Proj No: SWDG 8313

Status:

Ongoing

Date: 30 Oct 89

Start Date FY 1984	Est Comp Date:	
Principal Investigator:	Facility:	
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center	
ept/Svc:	Associate Investigators:	
Department of Medicine/Oncology		
(ey Words:		
Breast carcinoma		
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:	
	Reporting Period: 0	

Objective(s): 1) To compare through a randomized prospective study, the recurrence rates and disease-free intervals (DFI) for postoperative axillary node positive estrogen receptor negative (ER-) breast cancer patients given adjuvant therapy with either short term intense chemotherapy (FAC-M) or one year standard chemotherapy (CMFVP).

- 2) To compare the effect of these two adjuvant therapies on survival.
- 3) To compare the relative toxicity of the two therapies.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Five hundred-forty patients have now been accrued to this study. There have been no changes in the toxicity profile. We will revise the accrual goal to 600 patients, which should be reached within the next six months. At that time, the study will be closed and the replacement study activated.

Date: 30 Oct 89 Proj No	: SWOG 8325 Status: Completed
	with Mitotane (0, P' -DDD) and Cis-Platinum i
Start Date FY 1984	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Adrenal carcinoma	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Total Number of Subjects Enrolled Date of Periodic Review 16 Oct	Reporting Period: 0 to Date: 2
	sponsiveness of adrenocortical carcinoma to

2) To study the prognostic features of patients with metastatic and/or unresectable adrenal carcinoma receiving chemotherapy.

(0,P'DDD).

3) To document the toxicity of chemotherapy in this group of patients.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

Date:	30 Oct 89	Proj No:	SWDG 8326/27	Status: 0	ngoing
Title:	Evaluation of	f Combination Ch	emotherapy Usin	g High Dose	Ara-C in Adult
Acute l	Leukemia and Ch	ronic Granylocyt	ic Leukemia in	Blastic Cris	is, Phase III.

Start Date FY 1985	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	i
Leukemia, adult acute	
Leukemia, chronic granulocytic	j
Accumulative MEDCASE	Est Accumulative
Cost:	QMA Cost:
Number of Subjects Enrolled During (Reporting Period: 0
Total Number of Subjects Enrolled to	
Date of Periodic Review_ 16 Oct 1	

Objective(s): 1) To compare the effectiveness of three different drug combinations using high dose Ara-C alone or high dose Ara-C in combination with m-AMSA or Mitoxantrone for remission induction in relapsed adult leukemias including both acute non-lymphocytic leukemia, chronic granulocytic during accelerated or blastic phase, as well as untreated secondary acute leukemias.

2) To monitor the side effects of the above combination chemotherapy schedules.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: As of April, 1989, 321 patients have been entered with 257 being eligible. A total of ten patients are ineligible. Ten patients are not evaluable. There are 44 patients with insufficient information yet available for analysis. A careful analysis relating to the early death rate demonstrates that sepsis was the most frequent cause of early death accounting for 46% of the early deaths. As previously stated, the arm involving high-dose cytosine arabinoside and amsacrine has been closed to patient entry because of the marked increase in the number of early deaths on that arm. Patient accrual continues. the toxicity appears to be reasonable at the present time for patients receiving high-dose cytosine arabinoside alone or high-dose cytosine arabinoside plus Mitoxantrone.

Date: 30 Oct 89 Proj No: Sk	OG 8369 Status: Completed
Title: Combination Chemotherapy with Refractory Lymphoma, Phase II.	Mitoxantrone, Cis-Platinum and MGBG for
Start Date FY 1985	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words: Lymphoma	Associate Investigators:
Accumulative MEDCASE Cost:	Eur Accumulative OMA Cost:
Number of Subjects Enrolled During Repo	
Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 89	
Objective(s): 1) To determine if the Platinum and Methyl-Glyoxal Bis-Guanyll (response rate >30%) in patients with a Hodgkin's lymphoma. Response & ation	hydrazone (MGBG) has reasonable activity refractory unfavorable histology non-

2) To determine the toxicities of this combination of drugs.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

	group Protocol for Intermediate Thickness
Start Date FY 1984	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Melanoma	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Total Number of Subjects Enrolled t Date of Periodic Review 16 Oct	Reporting Period: 2
Objective(s): 1) To determine the	esfect excision margins around the prima

Objective(s): 1) To determine the safest excision margins around the primary melanoma.

- 2) To evaluate the management of the regional lymph nodes (immediate vs delayed lymphadenectomy).
- 3) To evaluate the relative prognostic value of various histopathological parameters of melanoma.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: The Southwest Oncology Group has contributed 73 patients out of approximately 600 patients entered. The median follow-up is approximately 30 months. Local recurrence rates for both the 2 cm. and 4 cm. arms is approximately 3%. Dr. Jewell reported that this study may not be able to determine an advantage of the 2 versus 4 cm. margin given the small recurrence rate. A plea was made at the meeting to enter additional patients, as approximately 100 patients are still needed before the study will close.

Date: 30 Oct 89 Proj No:	SWOG 8406 Status: Ongoing
Title: Evaluation of Esorubicin (4' Phase II.	Deoxydoxorubicin) in Malignant Lymphoma
Start Date FY 1985	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	_i
Key Words:	
Lymphoma, malignant	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Re Total Number of Subjects Enrolled to	Date: 4
Date of Periodic Review 16 Oct 89	Results Continue
Objective(s): 1) To determine the r malignant lymphoma treated with Esoru	esponse rate and response duration of bicin.

2) To define the qualitative and quantitative toxicities of Esorubicin administered in a Phase II study.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is closed to new patient accrual, open for followup purposes only.

Title: Carboplatin/Cyclophosphamide	SMOG 8412 Status: Completed vs. Cisplatin/Cyclophosphamide in surable (Sub-Optimal) Disease Stages III
Start Date FY 1989	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Cancer, Ovarian	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Re Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 89	porting Period: 0 Date: 0

Objective(s): 1) To carry out a Phase III randomized trial of carboplatin + cyclophosphamide and cisplatin + cyclophosphamide in patients with previously untreated measurable and non-measurable (suboptimal) Stage III and IV ovarian cancer to evaluate comparative pathologically proven complete response rates associated with both treatments.

2) To evaluate the comparative toxicities of the two combination drug regimens.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

Proj No: SWOG 8417 Status: Ongoing

Date: 30 Oct 89

Start Date FY 1985	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Adult acute lymphoblastic leukemia	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
	OMA Cost:

Objective(s): 1) To compare the effects on remission duration and survival of two consolidation regimens: the L10-M consolidation used in SMDG 8001 versus a regimen employing Daunomycin, Cytosine Arabinoside, 6-Thioguanine and escalating Methotrexate/L-Asparaginase in patients with adult acute lymphoblastic leukemia.

2) To compare the toxicities of the two consolidation regimens.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Accrual to this study has been excellent. The regimen appears to be very well tolerated and leukemic cell samples are being appropriately received by the central reference laboratory at the University of Texas at San Antonio.

Date: 30 Oct 89 Proj No:	SWDG 8500 Status: Ongoing
	anced Measurable Ovarian Cancer with
• · · · · · · · · · · · · · · · · · · ·	
Start Date FY 1988	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	_i
Key Words:	
Cancer, Ovarian	İ
	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Re	porting Period: 0
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 89	
Objective(s): 1) to evaluate the an metastatic or recurrent epithelial ca first-line cisplatin or carboplatin-c	
2) To further characterize the toxic	ity of the cisplatin analogue CHIP.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study remains open only to patients who have progressed on car op tin therapy.

Date: 30 Oct 89 Proj No: S	WOG 8501 Status: Ongoing
	Intravenous Cyclophosphamide in Patients
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words: Cancer, Ovarian	Associate Investigators:
Accumulative MEDCASE	
Cost:	CMA Cost:
Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to D Date of Periodic Review 16 Oct 89 Objective(s): 1) To carry out a Phas dose intraperitoneal cis-platinum (100	orting Period: 0 ate: 0 _ResultsContinue
plus intravenous cyclophosphamide for	optimal Stage III ovarian cancer. plications of the two combination drug
	ow the schema outlined in the protocol.
Progress: There is no reportable data	a available for this study.

Date: 30 Oct 89 Proj No: S	MOG 8507 Status: Ongoing
	nance Bcg Immunotherapy of Superficial
Bladder Cancer, Phase III	
•	
Start Date FY 1986	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	_1
Key Words:	
Bladder cancer	
	İ
	j
	İ
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	porting Period: 0
Total Number of Subjects Enrolled to I	Date: 12
Date of Periodic Review 16 Oct 89	Results Continue
Objective(s): 1) To compare the effe	ectiveness of intravesical and
	on a maintenance versus a no maintenance
schedule with respect to disease free	interval and rate of tumor recurrence in
patients with transitional cell carcin	noma of the bladder.
2) To assess the toxicity of maintenance	ance and no maintenance BCG
immunotherapy.	
······································	
Technical Approach: Therapy will fol	low the schema outlined in the protocol.
Touristant representation approved to	The same of the sa
Progress: This str y is closed to ne	w patient accrual, open for followsp
purposes only.	when the manifest of the contract

SNUG 8509 Status: Ungoing
Adenocarcinoma of the Prostate, Phase II
Est Comp Date:
Facility:
Brooke Army Medical Center
Associate Investigators:
i
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Est Accumulative
OMA Cost:
Reporting Period: 0
Date:8
39 Results Continue

Objective(s): 1) To assess the antitumor activity of menogaril in patients with advanced adenocarcinoma of the prostate.

2) To define the qualitative and quantitative toxicities of menogaril administered in a Phase II study.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is closed to new patient accrual. However, it will remain open for followup purposes.

Start Date FY 1986	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Brain tumors	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled	
Date of Periodic Review16 Oct	89 Results Completed

2) To determine the time to progression and overall survival in patients with malignant gliomas treated with intra-arterial Cis-platinum in addition to radiation therapy.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

Date: 30 Oct 89 Proj No: Si	ADG 8514 Status: Completed
Title: Randomized Comparison of Cisp	latin + 5-Fluorouracil vs CBOCA +
5-Fluorouracil vs Methotrexate in Advan	nced Squamous Cell Carcinoma of the Head
and Neck, Phase III.	·
Start Date FY 1986	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	
Carcinoma, squamous cell	i
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	<u> </u>
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	
Total Number of Subjects Enrolled to D	ate: _ 5
Date of Periodic Review 16 Oct 89	_ResultsCompleted
Objective(s): 1) To determine and co	
	vival time of patients treated with two
combination chemotherapy regimens: (Ar	
II) CBDCA + 5-fluorouracil with (Arm I	11) single agent methotrexate.
3). To determine the tourisities county	
2) to determine the toxicities associ	ated with each of the three treatments.
Technical Approach: Therapy will foll	ow the schema outlined in the protocol.
Dunguago. This physical de pour closed de	they information conding firs?
Progress: This study is now closed, f assessment of data.	urther information pending final

Menogaril.

Date: 30 Oct 89 Proj No: S	WOG 8515 Status: Ongoing
Title: Evaluation of Menogaril in No	
Start Date 13 May 1988	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words: Non-Hodgkins, Lymphoma	Associate Investigators: Richard O. Giudice, MAJ, MC
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Re Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 89	porting Period: 1 Date: 2
	esponse rate and response duration for lon-Hodgkin's lymphoma (NHL) treated with

2) To define the qualitative and quantitative toxicities of Menogaril administered in a phase II study.

Technical Approach: All patients must have a pathologically verified histologic diagnosis of non-Hodgkin's lymphoma with at le it one site of bidimensionally measurable disease. Patients must have failed and recovered from potentially curable treatment. Patients with a cumulative dose of Adriamycin $\geq 250 \text{ mg/m}^2$ are not eligible for this study. allowable prior chemotherapy depends on disease type. Patients will be stratified according to histology: unfavorable histology NHL vs favorable histology NHL.

Therapy will follow the schema outlined in the study protocol.

Progress: There have been 30 patients registered to this study so far. They are approximately evenly balanced between favorable and unfavorable histologies. There are no major problems. No unexpected toxicity has been seen.

Date: 30 Oct 89 Proj No:	SWDG 8516 Status: Ongoing
	vs m-BACOD vs ProMACE-CytaBom vs MACOP-B
in Patients with Intermediate or High	-Grade Non-Hodgkin's Lymphoma.
27 200	
Start Date FY 1986	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	1
Key Words:	- }
Non-Hodgkin's lymphoma, high-grade	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Re	
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 89	Results Continue
Objective(s): 1) To company in a va	ndemired Curry wide nothing the complete

Objective(s): 1) To compare in a randomized Group-wide setting the complete response rate, response duration and survival of patients with intermediate and high-grade non-Hodgkin's lymphoma treated with one of four combination chemotherapy regiments: CHOP, m-BACOD, ProMACE-CytaBOM, or MACOP-B.

To compare the toxicities of each regimen in this patient population.

Technical Approach: Therapy will follow the scheme outlined in the protocol.

Progress: Five hundred and sixty-one patients have now been randomized to this study. Accrual averages approximately 20-28 cases per month. There is a reasonable balance between the stratification factors. The primary reason for ineligibility involves the failure to confirm pathologic diagnosis at review; 59 patients are ineligible. No unusual toxicities were observed. Every patient randomized to a given arm should continue treatment on that arm unless there is a medical contraindication, as the results of treatments in these patients must be analyzed whether they are subsequently deemed eligible or ineligible.

Date: 30 Oct 89	Proj No: SMOG 8518 Status: Completed
Title: Study of Combined Modality Treatment for Inoperable Squamous Cell Carcinoma of the Esophagus, Phase I-II.	
Start Date FY 1987	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC.	MC Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/On</u> Key Words: Carcinoma, squamous cell	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:

Objective(s): 1) To determine the efficacy and toxicity of 5-fluorouracil (5-FU) and Cis-Platinum combined with concurrent radiotherapy in patients with Stage III epidermoid carcinoma of the esophagus.

- 2) To determine the feasibility and toxicity of "up-front" palliative laser therapy with this regiment.
- 3) To estimate the response rate and duration of response by clinical and computed tomography staging.
- 4) To determine the survival of patients treated by these modalities.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

Date: 30 Oct 89 Proj No Title: Phase II Evaluation of Me Patients With Advanced Bladder Can	thyl-Glyoxal Bis-Guanylhydrazone (MGBG)
racients with Advanced Bradder Cam	Let •
Start Date FY 1986	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words:	
Cancer, bladder	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled	
Date of Periodic Review 16 Oct	89 Results <u>Completed</u>

Objective(s): 1) To determine response rate and remission duration with weekly intravenous therapy using MGBG in patients with metastatic bladder carcinoma who have failed on higher priority protocols.

2) To define the qualitative and quantitative toxicity of this regimen.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

Facility:
Brooke Army Medical Center
Associate Investigators:
-!
Est Accumulative
OMA Cost:
porting Period: 0
Date: 0
Results Continue

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Nearly one-half of projected patients are accrued.

<u>Date: 30 Oct 89 Proj No: SWOG 8530 Status: Ongoing</u>
Title: Efficacy of Prednisone in Refractory and Relapsing Multiple Myeloma and Glucocorticoid Receptors, Phase II.

Start Date 7 Nov 87	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	
Myeloma, multiple	j
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	Reporting Period: 0
Total Number of Subjects Enrolled t	o Date: 3
Date of Periodic Review 16 Oct 89	Results Continue

Objective(s): 1) To estimate the response rate and duration with high dose prednisone in patients with refractory myeloma.

2) To measure glucocorticoid receptors in multiple myeloma.

Technical Approach: All patients must have a histologic diagnosis of multiple myeloma. Eligible patients must have had prior chemotherapy or hormonal therapy for myeloma and progression of disease.

Therapy will follow the schema outlined in the study protocol.

Progress: One hundred and eight patients have now been registered. There has been a correlation between glucocorticoid receptor expression with response to alternate day prednisone and survival in 77 patients. To date, objective response to prednisone has only been seen in 10% of the patients entered on study. This best results have been in patients who have had intermediate (as opposed to high or low) receptor levels expressed.

Proj No: SWOG 8568

Status:

Continue

Ongoing

Date: 30 Oct 89

Title: Combined Modality Therapy fany N, T3aN2-3, or any T4).	or Advanced Stage III Breast Cancer (T3b
Start Date FY 1987	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Breast cancer, stage III	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During R	

Objective(s): 1) To evaluate by serial biopsy and flow cytometry whether or not an increase of the percentage of cells in S+G₂+M can be induced in patients with locally advanced breast cancer by synchronization with a high physiologic dose of estradiol before chemotherapy is applied.

2) To obtain information by flow cytometry and serial biopsy when this increase in $S+G_2+M$ occurs.

Total Number of Subjects Enrolled to Date: 0
Date of Periodic Review 16 Oct 89 Results

3) To evaluate the toxicity of an aggressive program of hormonal synchronization, chemotherapy, radiation therapy and surgery on patients with T3b any N, T3aN2-3, T3aN, or T4 breast cancer lesions.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Twenty-nine patients have now been registered on this study. The majority of the patients entered are estrogen receptor positive; of those, most have had a slight increase in their S-phase and G2+M phase by flow cytometry with estrogen priming. However, the magnitude of the increase is not great. Several more patients need to be accrued before this study will close. A replacement study is being prepared using tamoxifen block followed by estrogen synchronization. There has been no unusual toxicity from the estrogen priming.

	Proj No: SWDG 8573 Status: Ongoing
	ed Small Cell Cancer with Concurrent Chemotherapy
Radiotherapy and Intensific	ation with High Dose Cyclophosphamide.
Start Date FY 1986	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, M	C Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Onco	logy
Key Words:	
Cancer, small cell	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled	During Reporting Period:
Total Number of Subjects En	
Date of Periodic Review	16 Oct 89 Results Continue

Objective(s): 1) To estimate the response rate and survival of patients with limited small cell lung cancer when treated with concurrent chemo-radiotherapy followed by chemotherapy and late intensification with high dose cyclophosphamide.

2) To assess the toxicity of this treatment program.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is closed to new patient accrual, open for followup purposes only.

Date: 30 Oct 89 Proj No: SWOG 8590 Status: Ongoing Phase III Study to Determine the Effect of Combining Chemotherapy With Surgery and Radiotherapy for Resectable Squamous Cell Carcinoma of the Head and Neck. Start Date FY 1985 Est Comp Date: Principal Investigator: Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Associate Investigators: Dept/Svc: Department of Medicine/Oncology Key Words: Squamous cell carcinoma of head and neck

Accumulative MEDCASE | Est Accumulative | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: | OMA Cost: |

Objective(s): 1) To test whether the addition of chemotherapy to surgery and radiotherapy prolongs disease-free survival and survival between the two study groups.

Continue

- 2) To test whether the addition of chemotherapy to surgery and radiotherapy increases local control rates at the primary site and/or the cervical neck nodes.
- 3) To determine if the patterns of failure have been changed with the addition of chemotherapy.

Date of Periodic Review 16 Oct 89 Results

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: The studies are accruing well and will be closed this summer. No analysis to date has been done, except to note that somewhere between 30 to 40 percent of the patients have not been able to go on study, primarily due to the presence of positive margins after surgery.

Date: 30 Oct 89 Proj No: SWOG 8591 Status: Ongoing
Title: NCI Intergroup #0035, An Evaluation of Levamisole Alone or Levamisole
plus 5-Fluorouracil as Surgical Adjuvant Treatment for Resectable
Adenocarcinoma of the Colon.

Start Date FY 1985	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	- i
Adenocarcinoma of colon	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During R	
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 8	9 Results Continue

Objective(s): To assess the effectiveness of levamisole alone and levamisole plus 5-fluorouracil as surgical adjuvant regimens for resectable colon cancer by comparison with untreated controls.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There is no reportable data available at this time.

Proj No: SWOG 8594

Status: Ongoing

Date: 30 Oct 89

Start Date FY 1986 Principal Investigator: Timothy J. O'Rourke, LTC, MC	Est Comp Date:	
	Facility: Brooke Army Medical Center	
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Cancer, bladder	Associate Investigators:	
Accumulative MEDCASE Cost:	Est Accumulative	

Objective(s): To determine if cisplatin in combination with doxorubicin, vinblastine and methotrexate is more effective than cisplatin alone in the treatment of patients with advanced bladder cancer in terms of objective response rate, response duration and survival.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is closed to new patient accrual, open for followup purposes only.

Date: 30 Oct 89 Proj No:	SWOG 8598 Status: Ongoing
Title: Prospective Trial for Local Radiation as a Single Modality to th	ized Cancer of the Esophagus: Comparing e Combination of Radiation Therapy and
Chemotherapy, Phase III Intergroup.	
Start Date FY 1987	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words:	
Cancer, esophagus	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During R	
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 8	
Objective(s): 1) To determine the curable subset of patients with squa	role of chemotherapy for a potentially mous cell cancer of the esophagus.

2) To determine if the patters of recurrence for patients treated with the combination of chemotherapy and radiation differs from those patients treated with radiation alone.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There is no reportable data available at this time.

NOG 8600 Status: Ongoing
f High Dose versus Standard Dose Cytosine ents With Acute Non-Lymphocytic Leuk emia,
Est Comp Date:
Facility:
Brooke Army Medical Center
Associate Investigators:
Est Accumulative
OMA Cost:
porting Period: 1 Date: 2 Results Continue

Objective(s): 1) To compare, among patients with acute non-lymphocytic leukemia, the rate of complete remission produced by induction regimens of either standard dose Cytosine Arabinoside and Daunorubicin or high-dose Cytosine Arabinoside and Daunorubicin.

- 2) To compare the durations of complete remission and of disease-free survival among patients who each receive one of three combinations of induction and consolidation regimens.
- 3) To determine the comparative toxicities of these three programs of induction and concelleation.
- Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Accrual to this study continues at the same rate. A reminder that the dose of high-dose cytosine arabinoside for all patients was reduced to 2 grams/m2 regardless of age. This dose modification was made because of significant neurocoxicity in patients receiving the high-dose cytosine arabinoside arm.

	No: SWUG 8008 Status: Ungoing
	Platinum in Patients With Advanced Breast
Cancer, Phase I-II.	
<u> </u>	
Start Date FY 1987	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	<u> </u>
Breast cancer	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled Duri	
Total Number of Subjects Enrolle	
Date of Periodic Review 16 (
2400 0. 101 10410 NC410N	70 00

Objective(s): 1) To evaluate the response rate and remission duration of the combination of Mitoxantrone and cis-platinum used as second-line therapy for metastatic breast cancer.

2) To evaluate the toxicity of this drug combination in these patients.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This trial has 26 patients entered and there is no reportable data available at this time.

<u>Date: 30 Oct 89 Proj No: SWOG 8610 Status: Ongoing</u>
Title: Prospective Randomized Clinical Trial of the Capillary Cloning System for Patients with Extensive Small-Cell Lung Cancer, Phase III.

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Cancer	
Small-Cell Lung	
	!
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled Durin	ng Reporting Period: 1
Total Number of Subjects Enrolled	
	Oct 89 Results Ongoing

Objective(s): 1) To evaluate the ability of the capillary cloning system to improve upon patient response and survival when compared to a standard regimen (Vincristine + adriamycin + cyclo-phosphamide)(VAC) by selecting patient-specific regimens. These individual patient regimens will be formulated from the best two or three drugs which are effective against the patient's small-cell lung cancer in vitro.

2) To assess whether a cloning system has a place in the clinical care of the patient with extensive small-cell lung cancer.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: This is a new study, no reportable data available.

	Shedules of Trimetreveta Vergus	
Title: A Randomized Trial of Two Schedules of Trimetrexate Versus 5-Fluorouracil in Colorectal Carcinoma, Phase II-III.		
5-ridorodracii in colorectal carcinoma, rhase 11-111.		
Start Date FY 1987	Est Comp Date:	
Principal Investigator:	Facility:	
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center	
Dept/Svc:	Associate Investigators:	
Department of Medicine/Oncology		
Key Words:		
Carcinoma, colorectal		
,		
	j.	
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost:	
Number of Subjects Enrolled During I	Reporting Period: 0	
Total Number of Subjects Enrolled to	o Date: 3	
Date of Periodic Review 16 Oct 8	89 Results Completed	
Objective(s): 1) To determine and	compare the response rates, response	
	exate given on two different schedules to	
patients with advanced colorectal co		

2) To compare patient survival on trimetrexate with those on 5-FU alone.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

<u>Date: 30 Oct 89 Proj No: SWOG 8616 Status: Ongoing</u>
Title: Intergroup Phase III Randomized Study of Doxorubicin and Dacarbazine With and Without Ifosfamide and Mesna in Advanced Soft Tissue and Bone Sarcoma.

Start Date FY 1987	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	<u> </u>
Sarcoma	j
Accumulative MEDCASE	Est Accumulative
Cost:	i OMA Cost:
Number of Subjects Enrolled During F Total Number of Subjects Enrolled to	Reporting Period: 0
Date of Periodic Review 16 Oct 8	39 Results <u>Continue</u>

Objective(s): To determine if the addition of ifosfamide to doxorubicin and dacarbazine significantly changes the response rate, survival, and toxicity.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: As of April 1, 1989, 387 patients had been registered on the study. Thirty-nine of these patients were in the non-randomized arm for metastatic osteogenic sarcoma, Ewing's sarcoma and rhabdomyosarcoma. This left 348 registered to the randomized portion of the study. Since the original goal of the randomized part of the study was to accrue 280 response evaluable patients, the accrual goal had been met for this portion of the study and it was closed. The non-randomized portion of the study will remain open in an attempt to determine the response rate of osteosarcoma, Ewing's sarcoma, and rhabdomyosarcoma to combination therapy with doxorubicin, DTIC, and ifosfamide.

Date: 30 Oct 89 Proj No: SWOG 8621 Status: Ongoing
Title: Chemo-Hormonal Therapy of Postmenopausal Receptor-Positive Breast
Cancer, Phase III.

Est Comp Date:
Facility:
Brooke Army Medical Center
Associate Investigators:
Richard O. Giudice, MAJ, MC
1
Est Accumulative
OMA Cost:
orting Period: 0
ate: 0
Results Continue

Objective(s): 1) To compare initial combined chemo-hormonal therapy with initial hormonal therapy with respect to survival.

- 2) To compare initial chemo-hormonal therapy using tamoxifen with that using DES with respect to survival.
- 3) A secondary goal is to compare combined chemo-hormonal therapy with initial hormonal therapy with respect to response in patients with measurable disease.

Technical Approach: Patients must have clinical or histologic confirmation of recurrent or disseminated breast cancer, with tumor positive for estrogen receptor or progesterone receptor. Patients with completely dissected disease or with a life threatening visceral disease will be ineligible.

Therapy will follow the schema outlined in the study protocol.

Progress: To early for any reportable data.

Date: 30 Oct 89 Proj No:	SMOG 8624 Status: Completed
Title: A Phase III Randomized Tria Myeloma.	l of Combination Therapy for Multiple
Start Date FY 1987	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Myeloma, multiple	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During R	
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 8	9 Results <u>Completed</u>
	fectiveness of three chemotherapy on of remission in previously untreated three schedules are: 1) VMCP/VBAP; 2)

2) To compare the value of Intron-A maintenance versus no maintenance for patients proven to achieve remission.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

Date: 30 Oct 89 Proj No:	SWDG 8626 Status: Ongoing
Title: Study of Recombinant DNA Gam	ma Interferon in Advanced Cancer of the
Pancreas, Phase II.	
•	
Start Date FY 1988	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Cancer, pancreatic	i
• •	i
	İ
	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Re	porting Period: 0
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 89	
Objective(s): 1) To determine the c	linical response of recombinant damma

interferon in pancreatic adenocarcinoma.

2) To define the qualitative and quantitative toxicities of recombinant gamma interferon in a Phase II study.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is closed to new patient accrual, open for followup purposes only.

Date: 30 Oct 89 Proj No	: SWOG 8629 Status: Completed
Title: Adjuvant Therapy With Adriamycin Plus Cisplatin for Endometrial Sarcomas at High Risk of Recurrence, Phase II.	
	•
Start Date FY 1987	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	 i
Sarcoma, endometrial	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled	
	: 89 Results Completed

2) To determine the toxicities of the adjuvant systemic chemotherapy in patients with limited endometrial sarcoma.

survival and pattern of recurrence in patients with limited endometrial

sarcoma.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

Date: 30 Oct 89 Proj	No: SMOG 8630 Status: Completed
Title: Phase II Study of Recom Colorectal Cancer.	binant DNA Gamma Interferon in Advanced
Start Date FY 1987	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Cancer, colorectal	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled Duri Total Number of Subjects Enrolle Date of Periodic Review 16 0	ed to Date: 4
Objective(s): 1) To determine gamma interferon in colorectal of	the clinical response rate of recombinant cancer.

2) To define the qualitative and quantitative toxicities of recombinant gamma interferon in colorectal cancer.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

Date: 30 Oct 89 Proj No:	SWOG 8632 Status: Completed
Title: Evaluation of Echinomycin i	n Central Nervous System Tumors, Phase II
Start Date FY 1987	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Tumors, central nervous system	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During R	Reporting Period: 0
Total Number of Subjects Enrolled to	Date: 1
Date of Periodic Review 16 Oct 8	
Objective(s): 1) To assess the eff	ricacy of Echinomycin given once every

2) To assess the qualitative and quantitative toxicities of Echinomycin given by this schedule in a Phase II setting.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

seven days times four weeks followed by a two-week rest in recurrent or residual central nervous system tumors by evaluation of response--rate,

duration and survival.

Proj No: SWOG 8640

Status:

Completed

30 Oct 89

Date:

Cost:

Start Date 15 Dec 87	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	i
Carcinoma, Cervix	ĺ
Accumulative MEDCASE	

Objective(s): To evaluate tumor response to didemnin-B or trimetrexate in patients with metastatic or recurrent squamous carcinoma of the uterine cervix who have failed treatment protocols of higher priority.

OMA Cost:

Results Completed

Technical Approach: This study is open to patients who have histologically proven metastatic or recurrent squamous carcinoma of the uterine cervix. The patients must have bidimensionally measurable disease. The patients may have no detectable ascites or pleural fluid. There may be no prior systemic chemotherapy and any prior radiotherapy must have been to less than 25% of the bone marrow.

Therapy will follow the schema outlined in the study protocol.

Number of Subjects Enrolled During Reporting Period:

Total Number of Subjects Enrolled to Date: 0

Date of Periodic Review 16 Oct 89

Progress: Study analysis is underway. However, there is still no reportable data.

Proj No: SWOG 8641

Status:

Completed

Date:

30 Oct 89

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	<u> </u>
Sarcomas, advanced measurable	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct	

Objective(s): 1) To evaluate the response-rate and duration of response of advanced soft-tissue sarcomas treated with the combination of ifosfamide and high-dose cisplatin.

2) To evaluate the qualitative and quantitative toxicities of the combination of ifosfamide and high-dose cisplatin in a population of patients with advanced soft-tissue sarcomas.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: This is a new study, no reportable data available.

Proj No: SWOG 8642

Status:

Ongoing

Date: 30 Oct 89

adjuvant therapy.

Start Date FY 1987	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology Key Words:	
, ,	į
	İ
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled t	
Date of Periodic Review 16 Oct	

2) To estimate the rates of toxicities among the patients who receive recombinant human interferon-gamma as adjuvant therapy.

survival among patients who are at high risk for recurrence of melanoma following surgical resection of all known disease, and who are randomized to receive either recombinant human interferon-gamma adjuvant therapy or no

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study has accrued very rapidly. There are currently 195 patients registered. There has been excellent compliance and very minimal side effects. Statistical requirements for this study and, in view of the rapid accrual, increase the power to 90%. This will require more patients. The initial protocol expectations were approximately 230 patients with a power of 80. An increase in the power to 90 will require accrual in excess of 300 patients.

Proi No: SWOG 8691

Date: 30 Oct 89

Date: 30 Oct 89 Proj No:	SWOG 8691 Status: Ongoing
	Deoxycoformycin versus Alpha-Interferon i
Start Date FY 1987	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words: Leukemia, hairy cell	Associate Investigators:
Accumulative MEDCASE Cost: Number of Subjects Enrolled During I Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct (
Objective(s): 1) To compare Deoxy	coformycin and Alpha-interferon with

respect to frequency of response, time to response and duration of relapsefree survival among unsplenectomized patients with hairy cell leukemia.

- 2) To compare Deoxycoformycin and Alpha-interferon with respect to improvement in specific patient characteristics.
- 3) To estimate the rate of response for each treatment when used among patients who have failed to respond to or had unresolvable toxicity from the other treatment.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This important study continues to accrue at a rate exceeding the anticipated accrual goal. It is anticipated that this study will be ready for closure in the summer of 1989.

Start Date 14 Oct 89	Est Comp Date:				
Principal Investigator:	Facility:				
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center				
Dept/Svc:	Associate Investigators:				
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC				
Key Words:					
Cancer, Breast					
	1				
Accumulative MEDCASE	Est Accumulative				
Cost:	OMA Cost:				
Number of Subjects Enrolled During Rep					
Total Number of Subjects Enrolled to D					
Date of Periodic Review 16 Oct 89					

Objective(s): 1) To compare the time to treatment failure and survival of medical castration using Zoladex with surgical castration in premenopausal women with advanced, ER + or PgR + breast cancer.

- 2) To compare the response rate of the two treatments.
- 3) To assess the response rate to surgical castration in patients failing to respond to or relapsing on Zoladex, and the response rate to Zoladex in patients failing to respond to or relapsing on surgical castration.
- 4) To compare toxicities of medical castration and surgical castration.
- 5) To assess the value of post-treatment hormone levels (LH, FSH and estradiol) in predicting response to medical castration.
- 6) To assess the effect of long-term Zoladex treatment on hormone levels (LH, FSH and estradiol) in responding patients.

Technical Approach: Patients must have metastatic breast cancer. They must be premenopausal, have a performance status of 0-2 and be ER or PgR positive. No prior hormone therapy or chemotherapy for advanced disease is allowed. Prior adjuvant chemotherapy is allowed. Adjuvant tamoxifen is allowed provided relapse occurred ≥ 6 months after completion of therapy. Therapy will follow the schema outlined in the study protocol.

Progress: Only 31 patients have been entered onto this study. If accrual does not pick up we will revise this into a second-line study following tamoxifen therapy in premenopausal metastatic breast cancer.

Proj No: SWOG 8693 Status: Ongoing

Date: 30 Oct 89

Dept/Svc: Associa Department of Medicine/Oncology Key Words:		
	Army Medical Center	
	te Investigators:	
	Est Accumulative OMA Cost:	

Objective(s): 1) To determine whether the intensity of adjuvant chemotherapy affects its success in terms of local recurrence, disease-free survival and overall survival in patients who have primary osteosarcoma of the extremities and who are randomized to either surgery followed by adjuvant chemotherapy with three drugs or surgery followed by adjuvant chemotherapy with six drugs.

2) To determine the influence of clinical prognostic variables on disease outcome.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study was temporarily closed because of severe toxicity reported on two patients treated according to the protocol, but not registered on the protocol. An amendment in the treatment regimen has been prepared in an attempt to lessen the risk of severe mucositis as was seen in those patients treated off the protocol. In addition, the protocol has been amended to reflect that the Statistical Center has changed from ECOG to the Southwest Oncology Group. A revised protocol is to be sent to Group members in the near future.

Date: 30 Oct 89 Proj No: SMOG 8694 Status: Ongoing Title: A comparison of Pentostatin and Alpha-Interferon in Splenectomized Patients With Active Hairy Cell Laukemin. Start Date FY 1987 Est Comp Date: Principal Investigator: Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Dept/Svc: Associate Investigators: Department of Medicine/Oncology Key Words: Leukemia, hairy cell Accumulative MEDCASE ! Est Accumulative OMA Cost: Number of Subjects Enrolled During Reporting Period: Total Number of Subjects Enrolled to Date: 0 Date of Periodic Review 16 Oct 89 Results Continue

Objective(s): 1) To compare the frequency of response between pentostatin and a-IFN treatment in patients with hairy cell leukemia who following splenectomy manifest active or progressive disease.

- 2) To compare time to response between these two treatments.
- 3) To compare the response duration between these two treatments.
- 4) To determine whether pentostatin salvages non-responders to a-IFN treatment and whether a-IFN salvages non-responders to pentostatin treatment.
- 5) To compare the toxicity of the two treatments.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study will continue to have problems with accrual as many of the patients with hairy cell leukemia are no longer being splenectomized. This change in therapeutic approach decreases the number of patients who will be potentially available for registration on this study. We will continue to register patients on this trial as it is an important intergroup effort.

Date: 30 Oct 89 Proj No: Sk	OG 8695 Status: Ongoing						
Title: (GOG 85) A Randomized Comparison of Hydroxyurea versus 5-FU Infusion and Bolus Cisplatin as an Adjunct to Radiation Therapy in Patients with Stage							
Start Date FY 87	Est Comp Date:						
Principal Investigator: (vice Burke)	Facility:						
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center						
Dept/Svc:	Associate Investigators:						
Department of Medicine/Oncology	ğ						
Key Words:							
Carcinoma, Cervix							
Accumulative MEDCASE	Est Accumulative						
Cost:	OMA Cost:						
Number of Subjects Enrolled During Rep	orting Period: 0						
Total Number of Subjects Enrolled to D	ate: 0						
Date of Periodic Review 16 Oct 89							
Objective(s): 1) To determine whether	r hydroxyurea or the combination of						

Objective(s): 1) To determine whether hydroxyurea or the combination of 5-Fluorouracil and cisplatin is superior as a potentiator of radiation therapy in advanced cervical carcinoma.

2) To determine the relative toxicities of hydroxyurea versus the combination of 5-fluorouracil and cisplatin when given concurrently with radiation therapy.

Technical Approach: Patients with primary, previously untreated, histologically confirmed invasive squamous cell carcinoma, adenocarcinoma or adenosquamous carcinoma of the uterine cervix, Stages II-B, III-A, III-B and IV-A with negative para-aortic nodes are eligible.

Therapy will follow the schema outlined in the study protocol.

Progress: This intergroup study has accrued patients very slowly from the Southwest Oncology Group because of the requirement for surgical staging eligibility. There is no further reportable data.

Proj No: SWOG 8696

Status:

Completed

Start Date FY 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	
Cancer, Breast	
Accumulative MEDCASE	Est Accumulative
Cost:	1 OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled t	
Date of Periodic Review 16 Oct 89	

Objective(s): 1) To correlate the proliferative activity, ploidy, and HER-2/new gene expression with clinical features including the response to therapy and survival in patients entered on SWOG 8294.

Technical Approach: Previously obtained tissue specimens from patients enrolled on SWOG 8294 are sent for flow cytometry analysis.

There is no therapy involved in this study protocol.

Date: 30 Oct 89

Progress: There is no reportable data available at this time.

Start Date FY 87	Est Comp Date:		
Principal Investigator:	Facility:		
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center		
Dept/Svc:	Associate Investigators:		
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC		
Key Words:	i		
Cancer, Breast	İ		
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During	Reporting Period: 0		
Tabal Bumbau af Cubdaaba Enuallad b			
Total Number of Subjects Enrolled t Date of Periodic Review 16 Oct 89			

Objective(s): 1) Investigate the induction efficiency and impact on time to treatment failure and survival of CAF vs CAF-TsAVbH used in a rotating schedule.

- 2) Investigate the value of CMF(P)TH vs no maintenance treatment in duration of complete response and survival.
- 3) Evaluate on-study disease characteristics and patient discriminants with respect to their prognostic use of the above objectives.

Technical Approach: Patients must have histologically documented mammary carcinoma with clinical and/or laboratory evidence of metastatic or recurrent disease. Patients must have measurable disease. All patients with ER negative tumors are eligible unless they have responded to prior hormone manipulation therapy. ER positive or ER unknown patients are eligible only if they have had prior therapeutic hormone manipulation and did not respond to this therapy.

Therapy will follow the schema outlined in the study protocol.

Progress: There is no reportable data available.

Date: 30 Oct 89 Proj No: SMDG 8700 Status: Completed
Title: Consolidation Therapy with High-Dose Cyclophosphamide and Total Body
Irradiation, Followed by Autologous Marrow Infusion in Metastatic Breast
Cancer, Phase II.

Start Date FY 88	Est Comp Date:		
Principal Investigator:	Facility:		
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center		
Dept/Svc:	Associate Investigators:		
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC		
Key Words:			
Cancer, Breast	İ		
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During F			
Total Number of Subjects Enrolled to			
Date of Periodic Review 16 Oct 89			

Objective(s): 1) To assess the effect of high-dose cyclophosphamide and total body irradiation with autologous bone marrow support on the response quality after "standard" chemotherapy.

2) To assess the survival after consolidation with high-dose cyclophosphamide and total body irradiation with autologous bone marrow support.

Technical Approach: Patients must have metastatic breast carcinoma in partial or complete remission after no more the six cycles of an combination chemotherapy. Partial and complete responses must have been maintained for at least four weeks. ER + patients are eligible only if they have failed hormonal therapy of have liver or lymphangitic pulmonary disease.

Therapy will follow the schema outlined in the study protocol.

Progress: There is no reportable data available.

<u>Date: 30 Oct 89 Proj No: SWDG 8703 Status: Completed</u>
Title: Evaluation of Vinblastine and High-dose Cis-Platinum in the Treatment of Advanced Non-Small Cell Lung Carcinoma, Phase II.

Start Date FY 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	 i
Carcinoma, Lung	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled	
Date of Periodic Review 16 Oct 89	

Objective(s): 1) To obtain an estimate of the activity of combination chemotherapy with vinblastine and high dose cisplatin in the treatment of advanced non-small cell lung carcinoma.

2) To assess the toxicity of combination chemotherapy with vinblastine and high dose cisplatin in patients with advanced non-small cell lung carcinoma.

Technical Approach: Patients with extensive non-small cell carcinoma of the lung who have recurrent or metastatic disease post surgery or radiation are eligible for this study. Patients must have adequate renal function, no prior chemotherapy and no history of brain metastasis.

Therapy will follow the schema outlined in the study protocol.

Progress: This trial of high-dose cisplatin and vinblastine in Stage IV NSCLC has accrued 54 registrations, and was temporarily closed on 11/15/88 as having met its accrual objectives. Dr. Grunberg reported that at least 45 patients had received a full initial course of therapy, and recommended that the trial be permanently closed.

Date: 30 Oct 89 Proj No: SWOG 8710 Status: Ongoing
Title: Trial of Cystectomy Alone Versus Neoadjuvant M-VAC + Cystectomy in
Patients with Locally Advanced Bladder Cancer, Phase III.

Start Date FY 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Ian Thompson, MAJ, MC
Key Words:	
Cancer, Advanced Bladder	ì
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	Reporting Period: 0
Total Number of Subjects Enrolled t	o Date: 0
Date of Periodic Review 16 Oct 89	Results Continue

Objective(s): 1) To compare the survival of those patients with locally advanced bladder cancer treated with cystectomy alone to those treated with M-VAC followed by cystectomy in a randomized Phase III neoadjuvant trial.

2) To quantify the "tumor downstaging" effect of neoadjuvant M-VAC in patients with locally advanced bladder cancer.

Technical Approach: All patients must have histologically proven diagnosis of T_2 - T_{4a} , N_0 , M_0 transitional cell carcinoma of the bladder without mixed histology. All patients must have adequate kidney, liver, and bone marrow function, a performance status of 0-1, and be judged potentially curable.

Therapy will follow the schema outlined in the study protocol.

Progress: This study has a total of 55 patients registered as of 3/89. No inordinately severe toxicities have been reported.

Date:	30	Oct 89	Proj	No:	SMOG	8711	Status	5: 0	ngoing	
litle:	A	Study of	Reproductive	Func	tion :	in Patie	ents with	esti	cular	Cancer.

Start Date FY 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	
Cancer. Testicular	j
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled t	
Date of Periodic Review 16 Oct 89	

Objective(s): 1. To evaluate the natural history of seminal fluid and hormonal parameters noted in Stage A testicular cancer patients treated by orchiectomy alone.

- 2. To evaluate the effects of a) orchiectomy plus platinum based combination chemotherapy or radiation therapy and b) retroperitoneal node dissection on the seminal fluid and hormonal parameters of Stage A, B, or C testicular cancer patients.
- 3. To estimate the median time to return to ejaculatory function following orchiectomy and retroperitoneal node dissection.
- 4. To study the effect of testicular cancer on sexual/ reproductive functioning.

Technical Approach: Each patient must have histologically proven diagnosis of testis cancer for which he has undergone an orchiectomy. Patients must be registered within three weeks of their surgery.

Therapy will follow the schema outlined in the study protocol.

Progress: There has been one registration to this study. There is no reportable groupwide data.

Date: 30 Oct 89 Proj No: Si	NDG 8/12 Status: Completed
Title: A Phase II Trial of Trimetrex	ate in the Treatment of Hepatoma.
Start Date FY 1987	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words:	Associate Investigators:
Hepatoma	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reportation Number of Subjects Enrolled to Description of Subjects Enrolled to Description of Subjects Enrolled to Description of Subjects Enrolled to Description of Subjects Enrolled During Reportation of Subje	
Date of Periodic Review 16 Oct 89	

Objective(s): To determine the response rate, response duration and toxicity of trimetrexate given on a daily times five schedule every three weeks to patients with hepatoma.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study is now closed, further information pending final assessment of data.

Start Date FY 88	Est Comp Date:		
Principal Investigator:	Facility:		
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center		
Dept/Svc:	Associate Investigators:		
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC		
Key Words:			
Carcinoma, Colorectal	1 1		
Accumulative MEDCASE Cost:	Est Accumulative		
Number of Subjects Enrolled During			
Total Number of Subjects Enrolled t			
Date of Periodic Review 16 Oct 89			

Objective(s): 1) To evaluate response to amonafide in previously untreated patients with colorectal carcinoma.

2) To assess the qualitative and quantitative toxicities of amonafide.

Technical Approach: Patients must have biopsy proven bidimensionally measurable adenocarcinoma arising from the colon or rectum. Patients may have had previous surgical therapy or previous radiation therapy. Patients must not have received any prior chemotherapy or no more than one prior biologic regimen.

Therapy will follow the schema outlined in the study protocol.

Progress: This study has been closed to new patient accrual, open for followup purposes only.

Date: 30 Oct 89 Proj No:	SWOG 8715 Status: Completed
Title: Evaluation of Amonafide in Ad	vanced Sarcomas.
Start Date FY 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Sarcomas, Advanced	Associate Investigators: _ Richard O. Giudice, MAJ, MC
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Re	
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 89	
Objective(s): 1) To evaluate the rewith amonafide.	esponse rate of advanced sarcomas treated

2) To assess the qualitative and quantitative toxicities of amonafide in a Phase II study.

Technical Approach: Patients must have measurable, pathologically verified, advanced soft tissue sarcoma. Patients may not have mesothelioma, Kaposi's sarcoma or osteogenic sarcoma. Prior treatment is allowed if no more than one prior chemotherapeutic regimen for metastatic disease has been given.

Therapy will follow the schema outlined in the study protocol.

Progress: This study has reached the accrual goal and is now in the process of review.

Proj No: SWOG 8717

Status: Ongoing

Date: 30 Oct 89

Start Date FY 88	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words: Cancer, Ovarian	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative
Cost: Number of Subjects Enrolled During F Total Number of Subjects Enrolled to Date of Periodic Review <u>16 Oct 89</u>	Reporting Period: 0 Date: 0

Objective(s): 1) To conduct a randomized Phase II trial of two treatment regimens, amonafide and Didemnin-B and to evaluate tumor response to each of these agents in patients with metastatic or recurrent epithelial carcinoma of the ovary who have failed on higher priority treatment protocols.

2) To assess the qualitative and quantitative toxicities of each of these treatment regimens.

Technical Approach: Patients must have histologically proven incurable advanced metastatic or recurrent epithelial Stage III or IV carcinoma of the ovary. Pathology review is required to verify eligibility. Patients must have bidimensionally measurable disease.

Therapy will follow the schema outlined in the study protocol.

Progress: There is no reportable data available.

Date: 30 Oct 89 Proj No:	SMOG 8/19 Status: Ungoing
	or Ifosfamide/Mesna in Endocrine Resistant
Prostate Cancer and of Ifosfamide/M	esna in Patients without Prior Endocrine
Manipulation. Phase II	
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	 i
Cancer, Prostate	
Accumulative MEDCASE	Est Accumulative
	· · · · · · · · · · · · · · · · · · ·
Cost:	OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled t	
Date of Periodic Review 16 Oct	89 Results <u>Continue</u>

Objective(s): To determine the response rate, response duration and toxicity of trimetrexate given on a daily \times 5 schedule every three weeks to patients with hepatoma.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There is no reportable data available.

Date: 30 Oct 89 Proj No: S	WDG 8720 Status: Ongoing
Title: Evaluation of Amonafide in Pan	creatic Adenocarcinoma
Start Date 9 Sep 88	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words: Adenocarcinoma, Pancreatic	Associate Investigators: Richard O. Giudice, MAJ, MC
Accumulative MEDCASE Cost:	
Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to D Date of Periodic Review 16 Oct 89)ate:1
Objective(3): 1) To evaluate response pancreatic adenocarcinoma.	se to amonafide in patients with

2) To assess the qualitative and quantitative toxicities of amonafide.

Technical Approach: Patients must have a verified diagnosis of pancreatic adenocarcinoma. Patients must have objectively measurable lesion(s) excluding CNS metastases. Prior chemotherapy is not permitted and only one prior biologic regimen.

Therapy wil: follow the schema outlined in the study protocol.

Progress: There is no reportable data available at this time.

Date:	30	Oct 8	19		_	roj	No:	SWOG	87	'21	Status	Ongoing
Title: Cancer.		Phase	II	Trial	of	Tri	netre	xate	in	the	Treatment of	Esophageal
<u> </u>			EV.	00			·			<u> </u>	D-4	

Start Date FY 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	
Cancer, Esophageal	İ
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	Reporting Period: 0
Total Number of Subjects Enrolled t	o Date: 1
Date of Periodic Review 16 Oct 89	Results Continue

Objective(s): 1) To determine the response rate, response duration and toxicity of trimetrexate given on a daily x 5 schedule every three weeks to patients with esophageal cancer.

Technical Approach: Patients must have a biopsy proven epidermoid carcinoma that is measurable. Patients may have had previous surgical therapy or radiation therapy.

Therapy will follow the schema outlined in the study protocol.

Progress: There is no reportable data available for this study.

Date:	30 Oct 89	Proj	No	SWOG 8723	Status:	Ongoing	
litle:	Evaluation of	Amonafide	in	Disseminated	Malignant Mel	lanoma Phase	II.

Start Date 9 Sep 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	 i
Melanoma, Disseminated	i
	<u> </u>
Accumulative MEDCASE	Est Accumulative
Accumulative MEDCASE Cost:	Est Accumulative
Cost:	OMA Cost:
	OMA Cost: Reporting Period: 2

Objective(s): 1) To evaluate response to amonafide in patients with Disseminated Malignant Melanoma.

2) To assess the qualitative and quantitative toxicities of amonafide.

Technical Approach: Patients must have pathologically verified malignant melanoma. Only patients with Stage IV disease are eligible. Patient must not have received prior chemotherapy and only one prior biologic regimen is permitted.

Therapy will follow the schema outlined in the study protocol.

Progress: There is no reportable data available at this time.

Date: 30 Oct 89 Proj No:	SWOG 8725 Status: Ongoing
Title: Evaluation of Amonafide in Cer	vical Cancer.
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	_1
Key Words:	1
Cancer, Cervical	1
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	1
	_
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Re	
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 89	ResultsContinue
Objective(s): 1) To evaluate respon	se to amonafide in patients with
	rcinoma of the cervix who have failed or
higher priority treatment protocols.	

2) To assess the qualitative and quantitative toxicities of amonafide.

Technical Approach:

Therapy will follow the schema outlined in the study protocol.

Progress: This is a new study, no reportable data available.

Date: 30 Oct 89 Proj No: SMDG 8726 Status: Ongoing
Title: Evaluation of Amonafide in Refractory and Relapsing Multiple Myeloma.

Start Date 15 July 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	
Myeloma .	j
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Total Number of Subjects Enrolled t	Reporting Period: 0
Date of Periodic Review 16 Oct 89	

Objective(s): 1) To assess the antitumor activity of amonafide in patients with refractory and relapsing multiple myeloma by estimation of the response rate and the remission duration.

2) To assess the qualitative and quantitative toxicities of amonafide administered in a Phase II study.

Technical Approach: Patient must have a histologic diagnosis of multiple myeloma, have prior exposure to therapy on SWOG 8624 and have failed therapy, or have received only a single prior chemotherapy regimen. Three weeks must have elapsed since prior chemo— or radiotherapy. Patients must be past the nadirs from previous therapy and have a performance status of 2 or better. They must have measurable disease.

Therapy will follow the schema outlined in the study protocol.

Progress: This study is in the process of review.

Date: 30 Oct 89 Proj No: S	WOG 8728 Status: Ongoing
	tastatic Adenocarcinoma of the Kidney,
Start Date 22 Jan 88	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Kidney, Adenocarcinoma	Associate Investigators: Richard O. Giudice, MAJ, MC
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to D Date of Periodic Review 16 Oct 89	Pate: 1 Results Continue
Objective(s): 1) To evaluate the like	elihood of response in patients with

advanced renal cell carcinoma in order to assess whether Didemnin-B should be advanced to further studies.

2) To evaluate the qualitative and quantitative toxicities of Didemnin-B.

Technical Approach: All patients must have a histologically confirmed diagnosis of advanced adenocarcinoma of the kidney not curable by surgery. Disease must be bidimensionally measurable. All patients must have adequate kidney, liver, and bone marrow function. Patients must have a performance status of 0-2.

Patients may not have received prior chemotherapy. One prior hormonal or immunotherapy is permitted, but objective evidence of progression of disease following prior treatment is needed.

Therapy will follow the schema outlined in the study protocol.

Progress: Twenty-seven patients were accrued to this study in four months for an accrual rate of 6.7 patients per month. The study is now closed for evaluation of response and toxicity.

<u>Date: 30 Oct 89 Proj No: SWOG 8729 Status: Ongoing</u>
Title: A Phase II Trial of Low Dose Pala and High Dose 5-FU as a Short Term
Infusion in the Treatment of Adenocarcinoma of the Pancreas.

Start Date 8 Apr 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	<u> </u>
Adenocarcinoma, Pancreas	İ
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled t	
Date of Periodic Review 16 Oct 89	

Objective(s): 1) To evaluate response to a new regimen consisting of 24-hour infusion of high dose (effector) 5-FU and low dose (modulator) PALA in patients with advanced pancreatic adenocarcinoma.

2) To assess the qualitative and quantitative toxicities of the regimen.

Technical Approach: Patients must have verified advanced pancreatic adenocarcinoma that is objectively measurable.

Patients must have a central venous access placement (Hickman catheter or Infusaport) prior to starting therapy.

Therapy will follow the schema outlined in the study protocol.

Progress: This study was temporarily closed to patient accrual on June 15, 1988 for evaluation of response. There was no evidence of response seen, therefore this study is now undergoing full evaluation.

Proj No:

Date:

30 Oct 89

Title: Ifosfamide and Mesna in Malignant Mesothelioma, Phase II.

Start Date 13 May 88 | Est Comp Date:
Principal Investigator: | Facility:
Timothy J. O'Rourke, LTC, MC | Brooke Army Medical Center

SWOG 8731

Status:

Completed

Dept/Svc:
Department of Medicine/Oncology | Richard O. Giudice, MAJ, MC

Key Words:
Malignant Mesothelioma |

Accumulative MEDCASE | Est Accumulative
Cost: | OMA Cost:
Number of Subjects Enrolled During Reporting Period: O
Total Number of Subjects Enrolled to Date: O
Date of Periodic Review 16 Oct 89 | Results Completed

Objective(s): 1) To assess the activity of Ifosfamide and the uroprotector 2-mercaptoethane sodium sulphonate (Mesna) in patients with unresectable malignant mesothelioma.

2) To further evaluate the toxicity pattern of continuous infusion Ifosfamide/Mesna.

Technical Approach: All patients must have a pathologically verified diagnosis of unresectable malignant mesothelioma of the pleura, peritoneum, pericardium, or paratesticular area. All patients must have bidimensionally objectively measurable disease.

Therapy will follow the schema outlined in the study protocol.

Progress: Responses have been seen on this protocol in malignant mesothelioma. Currently 18 patients are registered on the study.

: SMUG 8/32 Status: Completed
Endometrial Carcinoma.
Est Comp Date:
Facility:
Brooke Army Medical Center
Associate Investigators:
Charles R. Harrison, MAJ, MC
Kenneth Hancock, MAJ, MC
i
Est Accumulative
OMA Cost:
Reporting Period: 0
to Date: 0
· · · · · · · · · · · · · · · · · · ·

endometrial carcinoma.

2) To assess the qualitative and quantitative toxicities of amonafide.

Technical Approach: Patients must have histologically proven incurable advanced metastatic or recurrent endometrial carcinoma. Disease must be bidimensionally measurable.

Therapy will follow the schema outlined in the study protocol.

Proj No: SWOG 8733

Status: Ongoing

Date: 30 Oct 89

Title: Evaluation of Operable Bladder Cancer Patients with Pre-Operative Irradiation + 5-FU Alone, Phase II, a Pilot Study for Patients Ineligible for SWOG-8710. Start Date 15 Jul 88 Est Comp Date: Principal Investigator: Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Associate Investigators: Dept/Svc: Department of Medicine/Oncology Ian Thompson, MAJ, MC Key Words: Cancer, Bladder

Accumulative MEDCASE | Est Accumulative | Cost: | OMA Cost: | Number of Subjects Enrolled During Reporting Period: | 1 | Total Number of Subjects Enrolled to Date: | 1 | Date of Periodic Review 16 Oct 89 | Results | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Continue | Cont

Objective(s): 1) Operable Patients: To evaluate the complete downstaging rate in patients with bladder cancer who are treated with pre-operative 5-FU/radiation. to assess the efficacy of treating patients with no histologic evidence of residual tumor following irradiation and 5-FU with additional irradiation and 5-FU without cystectomy. To assess the efficacy of treating patients who are not free of disease after initial treatment with 5-FU/radiation with radical cystectomy.

2) Inoperable Patients: To estimate the response rate of patients treated with 5-FU and radiation. To assess the qualitative and quantitative toxicities of this regimen in the treatment of bladder cancer.

Technical Approach: Patients must have primary or recurrent bladder cancer confined to the pelvis and no evidence of spread beyond the regional lymph nodes at or below the level of the bifurcation of the iliac vessels. Patients must not have any prior pelvic irradiation, or prior malignancies which are active, or synchronous non-bladder malignancies other than basal or squamous cell carcinoma of the skin or any other carcinoma in situ. Patients with prior inactive malignancies are eligible.

Therapy will follow the schema outlined in the study protocol.

SWOG

8734

Status:

Completed

Proj No:

30 Oct 89

Principal Investigator: Timothy J. O'Rourke, LTC, MC Dept/Svc: Department of Medicine/Oncology Key Words: Adenocarcinoma, Stomach Accumulative MEDCASE Facility: Brooke Army Medical Center Associate Investigators: Richard O. Giudice, MAJ, MC	Start Date 13 May 88	Est Comp Date:
Dept/Svc: Department of Medicine/Oncology Richard O. Giudice, MAJ, MC Key Words: Adenocarcinoma, Stomach Accumulative MEDCASE Associate Investigators: Richard O. Giudice, MAJ, MC	Principal Investigator:	Facility:
Department of Medicine/Oncology Richard O. Giudice, MAJ, MC Key Words: Adenocarcinoma, Stomach Accumulative MEDCASE Est Accumulative	Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Key Words: Adenocarcinoma, Stomach Accumulative MEDCASE Est Accumulative	Dept/Svc:	Associate Investigators:
Accumulative MEDCASE Est Accumulative	Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Accumulative MEDCASE Est Accumulative	Key Words:	
• · · · · · · · · · · · · · · · · · · ·	Adenocarcinoma, Stomach	
_ · · · · · · · · · · · · · · · · · · ·	Accumulative MFDCASE	Fst Accumulative
Cost: I DMA Cost:	Cost:	OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0		
	Date of Periodic Review 16 Oct 89	

Objective(s): 1) To evaluate response to a new regimen consisting of 24 hour infusion of high dose (effector) 5-FU and low dose (modulator) PALA in patients with advanced adenocarcinoma of the stomach.

Technical Approach: Patients must have verified advanced gastric adenocarcinoma that is objectively measurable. A central venous access placement is necessary prior to starting the therapy.

Therapy will follow the schema outlined in the study protocol.

<u>Date: 30 Oct 89 Proj No: SMOG 8735 Status: Ongoing</u>
Title: A Phase II Study of Recombinant Human Interferon-Alfa and Recombinant Human Interferon-Gamma in Previously Untreated Patients with Chronic Myelogenous Leukemia.

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	
Leukemia	i
Myelogenous, Chronic	İ
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	Reporting Period: 0
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct	

Objective(s): 1) To develop an appropriate dose for alternate day therapy with recombinant human alfa and gamma interferon, in previously untreated patients with chronic myelogenous leukemia (CML).

- 2) To estimate whether such a regimen so of sufficient effectiveness and of sufficiently limited toxicity to justify its investigation in further trials. The effectiveness of the regimen will be measured by the rates of hematologic, cytogenetic, and molecular remission it produces.
- 3) To evaluate effectiveness and toxicity of such a regimen once an appropriate dose is developed.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No: SWDG 8736 Status: Ongoing Title: Treatment of Localized Non-Hodgkin's Lymphoma: comparison of Chemotherapy (CHOP) to Chemotherapy plus Radiation Therapy.

Start Date 13 May 88	Est Comp Date:	
Principal Investigator:	Facility:	
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center	
Dept/Svc:	Associate Investigators:	
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC	
Key Words:		
Lymphoma, Non-Hodgkin's		
	1	
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost:	
Number of Subjects Enrolled During Re	porting Period: 0	
Total Number of Subjects Enrolled to		
Date of Periodic Review 16 Oct 89		

Objective(s): 1) To establish the complete response rate (CR%), CR duration, survival and toxicity of chemotherapy using Cyclophosphamide, Doxorubicin, Vincristine and Prednisone (CHOP) (eight cycles) versus CHOP (three cycles) plus radiation therapy in a cooperative group setting for patients with localized diffuse large cell lymphoma (DLC).

- 2) To determine if the difference in CR rates of combined treatment (less chemotherapy alone translates into longer survival with less toxicity.
- 3) To determine if subgroups (based on location, histology, age, stage) have significant prognostic importance with regard to CR%, time to progression, survival and toxicity.
- 4) To establish CR%, time to progression and survival for localized histologies other than diffuse large cell lymphoma.

Technical Approach: All patients must have biopsy proven Stage I or IE or non-bulky Stage II or IIE non-Hodgkin's lymphoma. Patients must have intermediate or high grade histology other than lymphoblastic lymphoma. No prior chemotherapy or radiation therapy is allowed. Patients with known AIDS syndrome or HIV associated complex are not eliqible.

Therapy will follow the schema outlined in the study protocol.

Detail Summary Shoot

Proi No: SWDG 8737

Status:

Ongoing

Date: 30 Oct 89

Title: Phase III AZQ 24-Hour Infus Gliomas.	sion Versus BCNU for Adult High Grade		
Start Date FY 1989	Est Comp Date:		
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center		
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Gliomas, high-grade	Associate Investigators:		
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:		
Number of Subjects Enrolled During F Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 8	Date: 4		

Objective(s): 1) To compare the activity of 24-hour infusion AZQ versus a BCNU control for adult, high grade, supratentorial gliomas. Primary endpoints for evaluation will be survival and time to progression. Secondary endpoints, when evaluable, will be partial and complete response rates as determined by contrast enhanced CT scan. Identification of a 50% increase in survival over control is sought.

2) To develop a data base on current surgical practices with protocol patients and to study further the prevalence and management of pulmonary toxicity from BCNU.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study has entered 18 patients at a rate of four per month for the last three months. The projected entry rate to complete the study in a timely fashion was eight per month. Toxicity to date has been primarily myelosuppression, with Grade IV toxicity seen on the fourth course of AZQ. All patients on the BCNU arm have had baseline pulmonary function tests performed at the time of entry.

Start Date 9 Sep 88	Est Comp Date:		
Principal Investigator:	Facility:		
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center		
Dept/Svc:	Associate Investigators:		
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC		
Key Words:			
Cancer, Non-Small Cell, Lung			
<u>.</u>			
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During Repo			
Total Number of Subjects Enrolled to Date:			
Date of Periodic Review 16 Oct 89 Results Continue			

Objective(s): 1) To compare standard dose cisplatin chemotherapy to high-dose cisplatin in hypertonic saline alone to high-dose cisplatin/mitomycin C in a randomized study, with stratification for known important prognostic factors, with regard to response rate, response duration and survival duration.

2) To compare the toxicities of these three chemotherapy regimens in patients with extensive non-small cell lung cancer.

Technical Approach: Patients with metastatic disease are eligible. this includes patients with metastases to the lung. This does not include patients whose only metastases are to the ipsilateral hilar nodes and/or mediastinal nodes, or to the supraclavicular nodes only. All patients must have pathologically demonstrated advanced non-small cell lung cancer of the following histologic types: squamous cell, adenocarcinoma or large cell carcinoma. All patients must have bidimensional (perpendicular diameters) objectively measurable disease.

Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proi No: SWOG 8741 Status: Ongoing Title: A Phase II Study of Recombinant Tumor Necrosis Factor (rTNF) in Patients with Refractory Carcinoma of the Breast. Start Date FY 1989 Est Comp Date: Principal Investigator: Facility: Brooke Army Medical Center Timothy J. O'Rourke, LTC, MC Associate Investigators: Dept/Svc: Department of Medicine/Oncology Key Words: Carcinoma Breast, Refractory Accumulative MEDCASE | Est Accumulative Cost: I OMA Cost: Number of Subjects Enrolled During Reporting Period: Total Number of Subjects Enrolled to Date: 0 Date of Periodic Review 16 Oct 89 Results Continue

Objective(s): 1) To obtain preliminary evidence of the antitumor effects of recombinant tumor necrosis factor (rTNF) administered to patients with refractory carcinoma of the breast.

2) To assess the tolerance and toxicity of rTNF.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date:	30	Oct 8	9		Pro	j No:	: SWO	G 8742	2	Status:	Ongoing	
Title:	Α	Phase	II	Study	of Re	comp.	inant	Tumor	Necrosi	s Factor	(rTNF)	in
Patient	ts w	ith M	letas	static	Sarco	ma.						

Est Comp Date:				
Facility:				
Brooke Army Medical Center				
Associate Investigators:				
Richard O. Giudice, MAJ, MC				
1				
Est Accumulative				
OMA Cost:				
orting Period:O				
Total Number of Subjects Enrolled to Date: 0				
Results Continue				

Objective(s): 1) To obtain preliminary evidence of antitumor effects of recombinant tumor necrosis factor (rTNF) administered to patients with metastatic sarcomas.

2) To assess the tolerance and toxicity of rTNF.

Technical Approach: Patients must have pathologically verified soft tissue sarcoma or bony sarcoma which is surgically nonresectable, metastatic to a site or sites distant from the primary lesion. All patients must have bidimensionally measurable disease.

Patients with lymphoma("reticulum sarcoma"), Kaposi's sarcoma and mesothelioma are ineligible.

Patients treated with zero or one previous chemotherapy regimen are eligible. Those who have been treated with previous biologics or immunotherapy are ineligible.

Therapy will follow the schema outlined in the study protocol.

SWOG 8743

Status: Ongoing

Proj No:

Title: A Phase II Study of Recombinant Tumor Necrosis Factor (rTNF) in Patients with Metastatic Colorectal Adenocarcinoma.

Start Date 12 Aug 88 | Est Comp Date:
Principal Investigator: | Facility:
Timothy J. O'Rourke, LTC, MC | Brooke Army Medical Center
Dept/Svc: | Associate Investigators:
Department of Medicine/Oncology | Richard O. Giudice, MAJ, MC
Key Words: |
Adenocarcinoma, Colorectal |

Accumulative MEDCASE | Est Accumulative | Cost: | OMA Cost: | Number of Subjects Enrolled During Reporting Period: | 3 | Total Number of Subjects Enrolled to Date: | 4 | Date of Periodic Review 16 Oct 89 | Results Continue

Objective(s): 1) To obtain preliminary evidence of the antitumor effects of recombinant tumor necrosis factor (rTNF) administered to patients with gastric adenocarcinoma.

2) To assess the tolerance and toxicity of rTNF.

Date: 30 Oct 89

Technical Approach: Patients must have histologically confirmed diagnosis of colorectal adenocarcinoma. They must have metastatic or recurrent disease incurable by surgery or radiation therapy and bidimensionally measurable disease.

Therapy will follow the schema outlined in the study protocol.

Progress: This study is closed to new patient accrual. However it remains open for followup purposes. There is no reportable data available at this time.

Date: 30 Oct 89 Proj No:	SWOG 8744 Status: Ongoing					
Title: A Phase II Study of Recombinant tumor Necrosis Factor (rTNF) In						
Patients With Refractory Multiple My	eloma.					
Start Date FY 1989	Est Comp Date:					
Principal Investigator:	Facility:					
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center					
Dept/Svc:	Associate Investigators:					
Department of Medicine/Oncology						
Key Words:						
Myeloma, multiple, refractory						
Accumulative MEDCASE	Est Accumulative					
Cost:	OMA Cost:					
Number of Subjects Enrolled During R	eporting Period: 0					
Total Number of Subjects Enrolled to	Date: 0					
Date of Periodic Review 16 Oct 8	9 Results Continue					
•	nary evidence of the antitumor effects of					
recombinant tumor necrosis factor (r	INF) administered to patients with					

refractory and relapsing multiple myeloma.

2) To assess the tolerance and toxicity of rTNF.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

SHOC 8750

OMA Cost:

Ctatue. Openia

Continue

Proj No.

Number of Subjects Enrolled During Reporting Period:

Total Number of Subjects Enrolled to Date: 0

Date of Periodic Review 16 Oct 89 Results

Data

30 Oc+ 80

ace: 30 occ 03 110,1 to: 3400 0730 300003: Oligottig			
Title: Pilot Study to Examine Cyto Leukemia, Ancillary	genetic Abnormalities in Patients with Acut		
Start Date FY 1989	Est Comp Date:		
Principal Investigator:	Facility:		
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center		
Dept/Svc:	Associate Investigators:		
Department of Medicine/Oncology			
Key Words:			
Leukemia, Acute, Ancillary			
Accumulative MEDCASE	Est Accumulative		

Objective(s): 1) To develop the capability for group-wide cytogenetic studies in leukemia within the Southwest Oncology Group with performance of studies at an institutional level followed by a central review of the data.

- 2) To organize a panel of expert cytogenetics within the Southwest Oncology Group that will form the core of the central cytogenetic review process.
- 3) To estimate the percentage of cases that are properly prepared and for which the central review confirms the local analysis.
- 4) To compare the cytogenetic abnormalities present in individual patients with acute leukemia registered on companion therapeutic protocols over this one year pilot period.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

uate: 30 Oct 89 Proj No:	SMUG 8/52 Status: Ungoing
Title: A Phase II Study of Recombin Patients With Endometrial Cancer.	nant Tumor Necrosis Factor (rTNF) in
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: Department_of Medicine/Oncology	Associate Investigators:
Key Words:	
Cancer, endometrial	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Ro Total Number of Subjects Enrolled to	eporting Period: 0 Date: 0
Date of Periodic Review 16 Oct 89	9 Results Continue
Objective(s): 1) To obtain preliming recombinant tumor necrosis factor (r	nary evidence of the antitumor effects of TNF) administered to patients with

2) To assess the tolerance and toxicity of rTNF.

endometrial cancer.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 30 Oct 89 P	<u>roj No: SWDG 8754</u>	Status: Ongoing
Title: Evaluation of Didemnin	B in Disseminated M	lalignant Melanoma, Phase II.
Start Date FY 1989	Est Comp	Date:
Principal Investigator:	Facility:	
Timothy J. O'Rourke, LTC, MC	j Brooke Ar	my Medical Center
Dept/Svc:	Associate	Investigators:
Department of Medicine/Oncolo	•	J
Key Words:		
Melanoma, Phase II	i	
Dissemináted, Malignant		
Accumulative MEDCASE		
	Est Accum	
Cost:	1 OMA Cost:	
Number of Subjects Enrolled D		od: <u>U</u>
Total Number of Subjects Enro		
Date of Periodic Review1	<u>6 Oct 89 Results</u>	Continue

Objective(s): 1) To evaluate the response rate of disseminated malignant melanoma treated with didemnin B.

2) To assess the qualitative and quantitative toxicities of didemnin B administered in a Phase II study.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No: SMOG 8755 Status: Completed Title: A Phase II Study of Recombinant Tumor Necrosis Factor (rTNF) in Patients with Pancreatic Adenocarcinoma.

Start Date 12 Aug 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	-i
Adenocarcinoma, Pancreatic	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Re	eporting Period: 1
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 89	

Objective(s): 1) To obtain preliminary evidence of the antitumor effects of recombinant tumor necrosis factor (rTNF) administered to patients with pancreatic adenocarcinoma.

2) To assess the tolerance and toxicity of rTNF.

Technical Approach: Patients must have histologically confirmed diagnosis of pancreatic adenocarcinoma. Patients must have bidimensionally measurable disease. Prior surgery and/or radiation therapy is acceptable. Patients must no have had prior chemotherapy.

Therapy will follow the schema outlined in the study protocol.

Progress: There is no reportable data available at this time, this study is still undergoing evaluation.

Proj No. SMOG 8760

Date: 30 Oct 89 Proj No: S	WOG 8760 Status: Ongoing				
Title: A Phase II Study of Recombinan Patients with Gastric Adenocarcinoma.	t Tumor Necrosis Factor (rTNF) in				
Start Date 12 Aug 88	Est Comp Date:				
Principal Investigator:	Facility:				
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center				
Dept/Svc: Department of Medicine/Oncology Key Words: Adenocarcinoma, Gastric	Associate Investigators: Richard O. Giudice, MAJ, MC				
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:				
Number of Subjects Enrolled During Rep	orting Period: 1				
Total Number of Subjects Enrolled to D	ate:1				
Date of Periodic Review 16 Oct 89	Results Continue				

Objective(s): 1) To obtain preliminary evidence of the antitumor effects of recombinant tumor necrosis factor (rTNF) administered to patients with gastric adenocarcinoma.

2) To assess the tolerance and toxicity of rTNF.

Date: 30 Oct 89

Technical Approach: Patients must have histologically confirmed diagnosis of gastric adenocarcinoma. Patients must have bidimensionally measurable disease.

Therapy will follow the schema outlined in the study protocol.

Proj No: SWOG 8788

Status: Ongoing

Date: 30 Oct 89

Start Date 11 Mar 88	Est Comp Date:		
Principal Investigator:	Facility:		
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center		
Dept/Svc:	Associate Investigators:		
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC		
Key Words:			
Cancer, Testicular	 		
Accumulative MEDCASE	 		
Cost:	OMA Cost:		

Objective(s): 1) To examine the value of "high dose" cisplatin (CDDP) versus "standard dose" CDDP in the regimen CDDP plus VP-16 plus bleomycin in advanced metastatic testicular cancer.

Technical Approach: all patients must have a histologic diagnosis of either advanced stage disseminated germ cell tumor, advanced extra gonadal germ cell tumor, or advanced metastatic testicular cancer.

Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No:	SWOG 8789 Status: Ongoing
Title: A Randomized Study of Etopos	side + Cisplatin and Etoposide +
Carboplatin (CBDCA) in the Management	t of Good Risk Patients With Advanced Geri
Cell Tumors.	
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Tumor, advanced germ cell	İ
, ,	
	i
	i
	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During R	
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 8	

Objective(s): To determine in a randomized trial the differences in response, toxicity, time to relapse and survival between two active chemotherapy regimens, etoposide + cisplatin and etoposide + carboplatin, for good risk patients with germ cell tumors.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Of the 115 patients registered to date, 20 are from Southwest Oncology Group participants. The toxicity between the two arms has been similar. All seminoma patients are eligible. The study remains open.

Proj No: SWOG 8788

Date: 30 Oct 89

Date: 30 Oct 89 Proj No:	SWOG 8788 Status: Ongoing				
Title: Phase III Evaluation of "High	h Dose" versus "Standard Dose" Cisplatin				
Combined with Bleomycin and VP-16 for	r Advanced Metastatic Testicular Cancer.				
Start Date 11 Mar 88	Est Comp Date:				
Principal Investigator:	Facility:				
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center				
Dept/Svc:	Associate Investigators:				
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC				
Key Words:					
Cancer, Testicular	İ				
•	· ·				
	(
Accumulative MEDCASE Est Accumulative					
Cost:	OMA Cost:				
Number of Subjects Enrolled During R	eporting Period: 1				
Total Number of Subjects Enrolled to	Date: 1				
Date of Periodic Review 16 Oct 89	Results Continue				

Objective(s): 1) To examine the value of "high dose" cisplatin (CDDP) versus "standard dose" CDDP in the regimen CDDP plus VP-16 plus bleomycin in advanced metastatic testicular cancer.

Technical Approach: all patients must have a histologic diagnosis of either advanced stage disseminated germ cell tumor, advanced extra gonadal germ cell tumor, or advanced metastatic testicular cancer.

Therapy will follow the schema outlined in the study protocol.

Proj No:

SWOG 8789

Status:

Ongoing

30 Oct 89

Date:

Start Date FY 1989	Est Comp Date:		
Principal Investigator:	Facility:		
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center		
Dept/Svc:	Associate Investigators:		
Department of Medicine/Oncology			
Key Words:			
Tumor, advanced germ cell			
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During	Reporting Period: 1		
Total Number of Subjects Enrolled t	o Date: 1		
Date of Periodic Review 16 Oct	89 Results Continue		

toxicity, time to relapse and survival between two active chemotherapy regimens, etoposide + cisplatin and etoposide + carboplatin, for good risk patients with germ cell tumors.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Of the 115 patients registered to date, 20 are from Southwest Oncology Group participants. The toxicity between the two arms has been similar. All seminoma patients are eligible. The study remains open.

Date:	30 Oct 89	Proj No: S	WOG 8790 S	Status:	Ongoing
Title:	A Randomized	Trial of Adjuvant	Intraperitoneal	Recombi	nant Interferor
Alpha-2	? in Stage III	Ovarian Carcinoma and Chemotherapy	in Patients who		

Start Date FY 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	
Carcinoma, Ovary	į
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During F	Reporting Period: 0
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 89	Populto Continuo

Objective(s): 1) To assess the efficacy of alpha-2 interferon as an adjuvant to surgery and chemotherapy upon overall disease-free survival as well as number of relapses and site of relapse in patients with no evidence of disease but at substantial risk for subsequent recurrence.

Technical Approach: Patients must have a histologically confirmed diagnosis of Stage III ovarian carcinoma and must be found to be disease-free at second look surgery after treatment on SWDG 8412 or SWDG 8501; or after treatment on any other regimen that contains at least six courses of cisplatin or carboplatin.

Therapy will follow the schema outlined in the study protocol.

Progress: Only 10 patients have been registered to this study. If the accrual does not improve consideration will be given to closing this trial.

Date: 30 Oct 89	<u>roj no: _SWUG 8/91 _ Status: Ungoing </u>
Title: (INT-0087) "Adjuvant T	rial of Soft Tissue Sarcomas, Phase III."
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncolo	
Key Words:	
Sarcomas, Phase III	ľ
Soft Tissue	
A	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled D	
Total Number of Subjects Enro	
Date of Periodic Review 1	6 Oct 89 Results Continue

Objective(s): 1) To assess whether adjunctive chemotherapy with adriamycin, DTIC, and ifosfamide/mesna can improve the survival and disease-free survival of selected patients with soft tissue sarcomas.

2) To establish a repository of frozen sarcoma tissue to be used for ancillary genetic and flow cytometric analysis of these tumors.

Specific goals of genetic analysis are to determine the alterations and expression of proto-oncogenes, kinases, growth factors, and growth factor receptors in Grade III adult sarcomas, to correlate these findings with various clinical parameters, and to determine if they provide independent prognostic information above that provided by stage and histologic type.

The goals of flow cytometric analysis are to determine the various patterns of ploidy and the proliferative activity of Grade III adult sarcomas and to correlate these findings with various clinical parameters. It is anticipated that with sufficient data, a model predicting survival may be derived from a combination of DNA ploidy patterns, size and location both for patients receiving and not receiving chemotherapy.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No: S	WOG 8792. Status: Ongoing
	SWDG 8792 Status: Ongoing Wellferon tm) as Adjuvant Treatment for
Resectable Renal Cell Carcinoma	
Start Date FY 1987	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	_1
Key Words:	1
Carcinoma, renal cell	
•	
	1
•	1
Accumulative MEDCASE	Est Accumulative
Cost:	1 OMA Cost:
Number of Subjects Enrolled During Rep	
Total Number of Subjects Enrolled to [
Date of Periodic Review 16 Oct 89	
Date of Ferroute Review	nesurcsconcinae
Objective(s). To assess in a control	led fachion the effectiveness of
interferon alfa-nl (WFllferon tm) as a	led fashion the effectiveness of surgical adjuvant in patients with ren
cell carcinoma.	Jangican adjuvant in patients with ren
TOTAL CHICAGO	

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Forty-five patients have been registered by the Southwest Oncology Group as of April 1989.

Date: 30 Oct 89 Proj No: SWDG 8793 Status: Ongoing
Title: Randomized Phase III Evaluation of Hormonal Therapy versus Observation
in Patients with Stage D1 Adenocarcinoma of the Prostate Following Pelvic
Lymphadenectomy and Radical Prostatectomy.

Start Date 13 May 88	Est Comp Date:			
Principal Investigator:	Facility:			
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center			
Dept/Svc:	Associate Investigators:			
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC			
Key Words:				
Adenocarcinoma, Prostate	ĺ			
Accumulative MEDCASE	Est Accumulative '			
Cost:	OMA Cost:			
Number of Subjects Enrolled During Rep	orting Period: 0			
Total Number of Subjects Enrolled to D	ate:0			
Date of Periodic Review 16 Oct 89	Results Continue			
Cost: Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to D	OMA Cost: orting Period: 0 ate: 0			

Objective(s): 1) To determine the time to progression and survival, in patients with histologically confirmed Stage D1 prostate cancer following prostatectomy and pelvic lymphadenectomy treated immediately with hormonal therapy.

2) Determine whether the effects of early hormone therapy on local control of D1 prostate cancer.

Technical Approach: Patients must have histologically confirmed diagnosis of adenocarcinoma of the prostate (not including "endometroid" carcinoma). Patients must have pathologic D1 disease. Histological confirmation of pelvic node involvement is required fro a patient to be considered to have Stage D1 disease. Confirmation must be obtained by formal pelvic node dissection.

Therapy will follow the schema outlined in the study protocol.

Date:	30 Oct 89	Proj	No:	SWOG	8794		Status: Ongoing
	Treatment nt Radiothe	_	Stage	C C	arcinoma	of	the Prostate with

Start Date 16 Oct 89	Est Comp Date:					
Principal Investigator:	Facility:					
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center					
Dept/Svc:	Associate Investigators:					
Department of Medicine/Oncology	I an Thompson, MAJ, MC					
Key Words:						
Carcinoma, Prostate	j					
Accumulative MEDCASE	Est Accumulative					
Cost:	OMA Cost:					
Number of Subjects Enrolled During Repo	orting Period: 4					
Total Number of Subjects Enrolled to Da						
Date of Periodic Review 16 Oct 89						

Objective(s): 1) To compare in a randomized study, the disease-free survival rates in completely resected patients with pathologic stage C (T3NOMO) carcinoma of the prostate assigned to be treated with adjuvant external beam radiotherapy to that in patients assigned to receive no adjuvant therapy.

2) To assess the qualitative and quantitative toxicities of patients with pathologic stage C (T3NOMO) carcinoma of the prostate when treated with external beam radiotherapy.

Technical Approach: Patients must have undergone radical prostatectomy and pelvic lymphadenectomy with a histologically proved diagnosis of pathologic stage C (T3NOMO) carcinoma of the prostate. Patients must be able to begin treatment within 14 weeks after radical prostatectomy.

Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No: SWOG 8795 Status: Ongoing
Title: Randomized Prospective Comparison of Bacillus Calmette-Guerin and
Mitomycin-C Therapy and Prophylaxis in Superficial Transitional Cell Carcinoma
of the Bladder, with DNA Flow Cytometric Analysis, Phase III.

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	j
Key Words:	ì
Carcinoma, Bladder	İ
Superficial, Transitional Cell	İ
	1
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	orting Period: 0
Total Number of Subjects Enrolled to D	Pate: 0
Date of Periodic Review 16 Oct 89	Results Continue

Objective(s): The overall objective of this protocol is to compare the efficacy and toxicity of two commonly used intravesical treatments for recurrent transitional cell carcinoma. The treatments to be evaluated are Mitomycin-C (MMC), and Tice substrain of Bacillus Calmette-Guerin (BCG).

- 1) The primary objective of this study is to compare the efficacy of MMC in preventing recurrence of superficial stage Ta and T1 transitional cell carcinoma of the bladder with that of BCG.
- 2) To compare the survival and cause-specific survival of patients randomized to each treatment arm.
- 3) To compare the toxicity of each treatment with respect to local effects of cystitis, bladder contraction, and hematuria as well as systemic effects including hypersensitivity, infection, bone marrow suppression, and others.
- 4) To compare treatments with respect to the pathologic grade and stage of recurring tumors.
- 5) To compare treatments with respect to differences in flow cytometry histogram findings of tumors before treatment and at the time of recurrence.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

<u>Date: 30 Oct 89 Proj No: SWOG 8796 Status: Ongoing</u>
Title: Combination Chemotherapy for Advanced Hodgkin's Disease, Phase III
Intergroup.

Start Date FY 88	Est Comp Date:				
Principal Investigator:	Facility:				
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center				
Dept/Svc:	Associate Investigators:				
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC				
Key Words:					
Hodgkin's Disease, Advanced					
Accumulative MEDCASE	Est Accumulative				
Cost:	OMA Cost:				
Number of Subjects Enrolled During Reportation Number of Subjects Enrolled to Da	ite: 3				
Date of Periodic Review 16 Oct 89	Kesults Continue				

Objective(s): 1) To compare the effectiveness of the MDPP/ABV Hybrid with sequential MOPP -> ABVD in patients with advanced or recurrent Hodgkin's disease and to determine which regimen is superior with respect to the following parameters: A) complete response rate; B) duration of complete response; C) freedom from progression; D) survival.

- 2) To prospectively correlate doses of chemotherapy administered with clinical outcome.
- 3) To analyze and compare the toxicity and patient tolerance on each of the above two treatment programs.

Technical Approach: Patients must have histologic confirmation of Hodgkin's disease (Ann Arbor classification). All patients entered must have the tissue from which the diagnosis of Hodgkin's disease was made sent to the SWOG Pathology Office for review and classification immediately following registration.

Therapy will follow the schema outlined in the study protocol.

Progress: No major problems have been reported in the intergroup study. Accrual goals should be met during this year.

<u>Date: 30 Oct 89 Proj No: SWOG 8804 Status: Ongoing</u>
Title: Evaluation of Cis-Platinum and DTIC in Inoperable Stage III and Stage IV Melanoma, Phase II.

Start Date FY 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	į
Melanoma, Inoperable	İ
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Repo	orting Period: 0
Total Number of Subjects Enrolled to Da	ate: 0
Date of Periodic Review 16 Oct 89	Results <u>Continue</u>

Objective(s): To evaluate the response rate and efficacy of DTIC and cisplatin in combination for patients with inoperable Stage III or Stage IV melanoma.

Technical Approach: Patients must have measurable, histologically confirmed metastatic melanoma with disseminated (Stage IV) or inoperable regional (Stage III) disease. Patients must have adequate renal, hepatic, and hematologic function, and a performance status of 0-2.

Therapy will follow the schema outlined in the study protocol.

Progress: This study has now accrued 51 patients, not all of whom are evaluable. To date, there have been six partial responders out of approximately 28 evaluable patients.

<u>Date: 30 Oct 89 Proj No: SWOG 8805 Status: Ongoing</u>
Title: Neoadjuvant Cisplatin and VP-16 plus Concurrent Chest and Optional
Brain Irradiation for Patients with Stage III Non-small Cell Lung Carcinoma, A
Phase II Pilot.

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	_ i
Carcinoma, Lung	İ
Stage III, Non-Small Cell	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	Reporting Period: 1
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct	

Objective(s): 1) To assess the feasibility and toxicity of treating patients with Stage III non-small cell lung cancer with cisplatin and VP-16 for two cycles, concurrent with a program of continuous, fractionated chest and optional whole brain irradiation, followed by surgical resection.

- 2) To assess the objective response rate, resectability rate, and proportion of patients free of microscopic residual disease after such an approach.
- 3) To assess whether immunocytochemical analysis and/or DNA analysis (ploidy, proliferative fraction) define subset(s) of patients who benefit from this combined modality approach, and to potentially assess the impact of chemoradiotherapy on the ploidy of the tumor.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No: SWOG 8806 Status: Ongoing
Title: A Phase II Study of Recombinant Tumor Necrosis Factor (rTNF) in
Patients with Advanced Bladder Cancer.

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	<u>i</u>
Key Words:	
Cancer, Bladder, Advanced	j
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Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	Reporting Period: 0
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct	

Objective(s): 1) To obtain preliminary evidence of the antitumor effects of recombinant tumor necrosis factor (rTNF) administered to patients with advanced bladder cancer.

2) To assess the tolerance and toxicity of rTNF.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No: SWDG 8809 Status: Ongoing
Title: A Phase III Study of Alpha Interferon Consolidation Following
Intensive Chemotherapy With ProMACE-MOPP (Day 1-8) in Patients With Low Grade
Malignant Lymphomas.

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	 i
Lymphomas, malignant, low grade	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During F	Reporting Period:1
Total Number of Subjects Enrolled to	Date: 1
Date of Periodic Review 16 Oct 8	

Objective(s): 1) To compare the disease-free survival of patients with low grade malignant lymphoma who receive alpha interferon consolidation therapy after intensive induction with chemotherapy \pm radiation therapy, to those who receive induction therapy alone.

- 2) To determine the complete response rate, response duration and survival of low grade lymphoma patients treated with ProMACE-MOPP (Day 1-8).
- 3) To compare the toxicities of induction and induction plus consolidation therapy in this patient population.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: This study has accrued 23 patients. Since the first patient was actually entered after January 1, 1989, accrual data are very preliminary. Several comments have been received regarding the difficulty in obtaining lymphangiograms and whether they truly impact on treatment decisions. The lymphangiogram requirement will, therefore, be removed. In addition, multiple tests to be performed during the interferon maintenance phase appear excessive and will be reduced.

Date: 30 Oct 89 Proj No: SWOG 8810 Status: Ongoing
Title: Six courses of 5-Fluorouracil and Cis-platinum with Correlation of
Clinical Cellular DNA Parameters in Patients with Advanced, Untreated and
Unresectable Squamous Cell Carcinoma of the Head and Neck Phase III.

Start Date FY 88	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	Richard O. Giudice, MAJ, MC
Key Words:	
Carcinoma, Head and Neck	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Total Number of Subjects Enrolled t	Reporting Period: 0

Objective(s): 1) Evaluate, following three and six courses of treatment the likelihood of increased numbers of patients achieving complete response rates when given three additional courses of the same regimen.

- 2) Evaluate the qualitative and quantitative toxicities of 5-fluorouracil and cisplatin following three and six courses of treatment.
- 3) Evaluate by serial biopsy and flow cytometry the correlation of the cellular DNA parameters of degree of aneuploidy (DNA index) and proliferative activity (SPF) with patient clinical characteristics, tumor morphology, cytotoxic response, disease free interval and survival.

Technical Approach: Patients must have a histologically confirmed diagnosis of advanced unresectable squamous cell carcinoma of the head and neck Stages T4, NO-3, MO or T2-3, N2-3, MO. Each patient will be examined by a multimodality team prior to entry on study. Patients must be staged as having measurable disease within one week prior to entry on study.

Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No: SWOG 8812 Status: Ongoing
Title: "Treatment of Limited Small Cell Lung Cancer with Concurrent
Chemotherapy, Radiotherapy, with or without GM-CSF and Subsequent
Randomization to Maintenance Interferon or No Maintenance."

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	 i
Cancer, Limited Small Cell, Lung	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During R	deporting Period: 0
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 8	

Objective(s): 1) Patients with limited stage small cell lung cancer (SCLC) will receive induction chemotherapy (cisplatin + VP-16 \pm GM-CSF) and concurrent chest radiotherapy. This study is designed to answer two questions:

Induction/Consolidation.

- To compare the days of neutropenia (absolute granulocyte counts <500/ul), the days of leukopenia (leukocyte counts <1,000/ul), the incidence and severity of infections, the incidence and duration of fever, the days on antibiotics, and the days of hospitalization between patients receiving GM-CSF and those not receiving GM-CSF.
- To evaluate the toxicities of GM-CSF in patients randomized to receive it.

2) Maintenance.

- To evaluate the ability of rHuIFN Alpha-2a to prolong remission duration and survival.
 - To evaluate the toxicities of rHuIFN Alpha-2a.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No:	SWOG 8814 Status: Ongoing
	evant Chemoendocrine Therapy with CAF and amoxifen Alone in Postmenopausal Patients and Positive Receptors.
Start Date FY 1989	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words: Cancer, Breast, Receptor Positive	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Re Total Number of Subjects Enrolled to	eporting Period: <u>0</u>
Date of Periodic Review 16 Oct 89	

Objective(s): 1) To compare disease-free survival and overall survival of postmenopausal primary breast cancer patients with involved axillary nodes and positive estrogen and/or progesterone receptors treated with standard adjuvant therapy with long-term tamoxifen, or with chemoendocrine therapy with CAF, followed by long-term tamoxifen, or with concurrent chemoendocrine therapy with tamoxifen and CAF.

2) To compare the relative toxicity of the three therapies.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

<u>Dat</u>	ie:	30 Oct 89	Proj N	o: Sk	NOG 8816	St	tatus:	Ongo	ing	
		: Study of Mycosis Fung			(Accutane)	Plus	rIFN-a	lpha	A (Rofe	ron-

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Fungoides, Mycosis, Phase II	j
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During F	
Total Number of Subjects Enrolled to	

Objective(s): 1) To evaluate the response rate of mycosis fungoides (cutaneous T-cell lymphoma) treated with the drug combination of 13-cis Retinoic Acid (Accutane) plus rIFN-alpha A (Roferon-A).

2) To assess the qualitative and quantitative toxicities of the regimen in a ${\sf Phase}\ {\sf II}\ {\sf study}$.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

	WOG 8819 Status: Ongoing
Title: Central Lymphoma Repository T	issue Procurement Protocol
Chart Data EV 1000	L Cod Comp Dada
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	i
Lymphoma, central	•
Tissue, repository	i
• •	İ
	1
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	
Total Number of Subjects Enrolled to D	
Date of Periodic Review_ 16 Oct 8	
	

Objective(s): 1) To acquire fresh snap-frozen lymphoma tissue to establish a central lymphoma tissue repository.

- 2) To establish a standard set of procedures for routine acquisition, banking, and study of lymphoma tissues within the cooperative group.
- 3) To use repository tissue to establish clinical correlations via presently activated phenotyping studies and future projected molecular studies assessing specimen DNA and RNA status.
- 4) To determine if pretreatment phenotype or genotype predict patient outcome with respect to complete response rate, time to progression, and survival using prospective trial designs.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No: S	WOG 8829 Status: Ongoing
Title: Evaluation of Amonafide in th	
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: <u>Department of Medicine/Oncology</u> Key Words: Tumors, CNS	Associate Investigators:
Accumulative MEDCASE	Est Accumulative
Cost:	I OMA Cost:
Number of Subjects Enrolled During Rep	
Total Number of Subjects Enrolled to C	
Date of Periodic Review 16 Oct 89	

Objective(s): 1) The objectives of this phase II study of amonafide in patients with cancer in the central nervous system are to:

- evaluate the response rate and duration of response in order to assess whether amonafide should be advanced to further studies and
- 2) Evaluate the qualitative and quantitative toxicities of amonafide.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

vale: 30 oct 69 Proj No:	SMOG 0033 Status: Undoing
	hlorambucil and Fludarabine Monophosphate
in Relapsed or Refractory Chronic Ly	mphocytic Leukemia.
Chart Data EV 1000	L Fat Care Bat
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	ا
Key Words:	
Leukemia, Chronic Lymphocytic,	
	1
Accumulative MEDCASE	Fet Accumulation
	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During R	eporting Period: <u>0</u>
Total Number of Subjects Enrolled to	Date: <u>0</u>
Date of Periodic Review 16 Oct 8	9 Results Continue

Objective(s): 1) To estimate the maximum tolerated dose (MTD) of Fludarabine monophosphate (FAMP) when given in combination with chlorambucil for patients with relapsed or refractory chronic lymphocytic leukemia (CLL).

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No:		
Title: Intraperitoneal Mitoxantron	e vs. Intraperitoneal FUdR in Ovarian	
Cancer Patients with Minimal Residua	11 Disease After Second-Look Surgery. A	
Randomized Phase II Pilot.	• •	
Start Date FY 1989	Est Comp Date:	
Principal Investigator:	Facility:	
Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center		
Dept/Svc: Associate Investigators:		
Department of Medicine/Oncology	, j	
Key Words:	Ti	
Cancer, Ovarian		
	i	
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Accumulative MEDCASE	Est Accumulative	
Cost: OMA Cost:		
Number of Subjects Enrolled During R		
Total Number of Subjects Enrolled to		
Date of Periodic Review 16 Oct		
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Obd-142 (1) 1) To4-134-1 4-14		

Objective(s): 1) To establish toxicity parameters for treatment regimens given intraperitoneally.

- 2) To evaluate the time to disease progression, sites of disease progression, and relapse rate of ovarian cancer patients with minimal residual disease after second-look surgery in the setting of a randomized phase II trial.
- 3) To evaluate the survival durations of patients on the two study arms.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Cancer, Breast, Receptor-Positive	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Repo	
Total Number of Subjects Enrolled to Da	
Date of Periodic Review 16 Oct 89	Results Continue

Objective(s): 1) To compare the recurrence rates, disease-free intervals (DFI), and hormone-receptor-positive survival for premenopausal women with axillary lymph node-positive breast cancer given adjuvant therapy with chemotherapy (CAF) alone or chemotherapy (CAF) followed by Zoladex (Z) or chemotherapy (CAF) followed by Zoladex plus Tamoxifen (Z + T). We will compare CAF with CAF + Z and CAF + Z with CAF + Z + T.

- 2) To compare the relative toxicities of these 3 regimens.
- 3) To assess the effect of CAF, CAF + Z, and CAF + Z + T on hormone levels (LH, FSH, and estradiol) in premenopausal women treated with these adjuvant therapies.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date:	30 Oct 89	Proj No	: SWOG	8854	Status:	Ongoing	
Title:	Prognostic	Value of Cytom	etry Meas	surements	of Breast	Cancer DNA	from
Postme	nopausal Pati	ents with Invol	ved Nodes	s and Rec	eptor Posi	tive Tumors	: A
Compan	ion Protocol	to SWDG 8814.			·		
·							

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Cancer, Breast	
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	1
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	Reporting Period: 0
Total Number of Subjects Enrolled t	
Date of Periodic Review 16 0c	

Objective(s): 1) To determine if ploidy analysis of breast cancer by routine clinical flow cytometry (FCM) technique can predict response to therapy and survival of patients registered to SMDG-8814.

2) To determine if ploidy analysis by image processing technique more accurately predicts patient response to therapy and survival than ploidy analysis by FCM.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No: SWOG 8891 Status: Ongoing
Title: Low-Grade Glioma Phase III: Surgery and Immediate Radiotherapy vs
Surgery and Delayed Radiotherapy.

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Glioma, Low-Grade, Phase III	j
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Accumulative MEDCASE	
Cost:	I OMA Cost:
Number of Subjects Enrolled During F	
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 8	
Date of Levingic Review 10 OCC 6	nesults continue

Objective(s): 1) In adult patients with low-grade supratemporial glioma, to compare the effect on survival of radiation therapy (RT) administered immediately after pathological diagnosis with RT administered on progression as measured by clinical and/or radiographic (CT scan) and/or MRI.

- 2) To compare quality of survival in patients receiving immediate RT with that in patients receiving delayed RT.
- 3) In a cohort of adult patients with low-grade glioma whose disabling neurologic signs and symptoms require that they be treated with RT immediately, to evaluate biological and clinical variables which might predict prognosis.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

<u>Date: 30 Oct 89 Proj No:</u> Title: A Study of Radiotherapy With Patients with Nasopharyngeal Cancer,	
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words: Cancer, Nasopharyngeal	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Re	eporting Period:0
Total Number of Subjects Enrolled to	Date: 0
Date of Periodic Review 16 Oct 89	9 Results <u>Continue</u>
Objective(s): 1) To compare the confailure, overall survival and patters	mplete response rate, time to treatment n of recurrence.

2) To assess the qualitative and quantitative toxicities

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No:	SWOG 8896 Status: Ongoing
	gical Adjuvant therapy of Rectal Carcinoma acted Infusion 5-Fluorouracil as a
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology Key Words: Carcinoma, rectal	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During (Reporting Period: 0
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct	89 Results <u>Continue</u>
	ocal recurrence rates, rates of distant

Objective(s): 1) To compare the local recurrence rates, rates of distant metastasis, disease-free survival, and overall survival in patients having potentially curative resections of modified Astler Coller $_{\rm B2-3}$ and $_{\rm C_{1-3}}$ rectal carcinoma treated with sequential chemotherapy and radiotherapy using 5-FU as a radiation enhancer given either by simple IV bolus administration or by Protracted Venous Infusion (PVI) concomitant with radiation therapy.

2) To compare the same study endpoints for the same group of patients who either receive Methyl-CCNU as a component of the systemic therapy regimen or do not receive Methyl-CCNU as a component of the systemic chemotherapy regimen.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There is no reportable data available at this time.

Date: 30 Oct 89 Proj No: SWOG 8897 Status: Ongoing
Title: Phase III Comparison of Adjuvant Chemotherapy with or without
Endocrine Therapy in High-Risk, Node Negative Breast Cancer Patients, and a
Natural History Follow-up Study in Low-Risk, Node Negative Patients
(Intergroup).

Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	i
Cancer, Breast, Node Negative	
Accumulative MEDCASE	
	OMA Cost:
<u>Cost:</u> Number of Subjects Enrolled During F	
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 8	39 Results Continue

Objective(s): 1) To compare disease-free survival (DFS) and overall survival(s) of high risk primary breast cancer patients with negative axillary lymph nodes treated with standard adjuvant chemotherapy with CMF for six cycles or with chemotherapy using CAF for six cycles.

- 2) To assess the value of the addition of tamoxifen for five years compared to no tamoxifen in these patients.
- 3) To compare the relative toxicity of the therapies.
- 4) To assess the prognostic significance of DNA flow cytometry in patients with small, occult invasive breast cancer treated by local therapy only.
- 5) To evaluate the disease free survival and survival of low risk invasive breast cancer determined by receptor status, tumor size and % of S phase treated by local therapy only.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

	No: SWOG 8899 Status: Ongoing
Title: A Prospectively Random	ized Trial of Low-Dose Leucovorin Plus 5-FU,
High-Dose Leucovorin Plus 5-FU,	or Observation Following Curative Resection in
Selected Patients with Duke's B	or C Colon Cancer.
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Cancer, Colon, Duke's B/C	
	1
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled Dur	
Total Number of Subjects Enroll	
Date of Periodic Review 16	Oct 89 Results Continue
	e effectiveness of 5-FU + low-dose Leucovorin,
	as surgical adjuvant therapy for resectable
colon cancer, when compared to	surgery alone.
Technical Approach: Therapy wi	Ill follow the schema outlined in the study
protocol.	

Date: 30 Oct 89 Proj No:	
Title: A Phase II Pilot of VAD and	VAD/Verapamil for Refractory Myeloma.
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	i
Key Words:	
Myeloma, Refractory	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During R	Reporting Period: 0
Total Number of Subjects Enrolled to	
Date of Periodic Review 16 Oct 8	

Objective(s): 1) To estimate the response rate and response duration with chemotherapy alone (VAD) and chemotherapy plus the chemo-modifier, verapamil (VAD/V), in patients who have failed previous combination chemotherapy.

- 2) To investigate the toxicities of these two treatments.
- 3) To evaluate the presence and prognostic significance of Ki-67 and P-glycoprotein in multiple myeloma.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

	SWOG 8905 Status: Ongoing
	rouracil (5FU) and its Modulation in
Advanced Colorectal Cancer.	
Start Date FY 1989	Est Comp Date:
Principal Investigator:	Facility:
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center
Dept/Svc:	Associate Investigators:
Department of Medicine/Oncology	
Key Words:	
Cancer, Colorectal, Advanced	
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Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled t	
Date of Periodic Review 16 Oct	89 Results Continue

Objective(s): 1) To determine and compare response rates and toxicities of 5-fluorouracil given by different schedules and/or with biochemical modulators to patients with advanced colorectal cancer.

2) To compare patient survival on the different 5-FU regimens.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 30 Oct 89 Proj No:	SWDG 8912 Status: Ongoing			
	Patients with Recurrent Squamous Cell			
Carcinoma of the Head and Neck.				
Start Date FY 1989	Est Comp Date:			
Principal Investigator:	Facility:			
Timothy J. O'Rourke, LTC, MC	Brooke Army Medical Center			
Dept/Svc:	Associate Investigators:			
Department of Medicine/Oncology				
Key Words:	-			
Carcinoma, Head/Neck, Squamous Cell	i			
the state of the s				
	1			
	. . - .			
Accumulative MEDCASE	Est Accumulative			
Cost:	I OMA Cost:			
Number of Subjects Enrolled During Re				
Total Number of Subjects Enrolled to				
Cate of Periodic Review 16 Oct 89	Results <u>Continue</u>			
014-44-42				
Objective(s): 1) Evaluate the response	· · · · · · · · · · · · · · · · · · ·			

carcinoma of the head and neck when treated with fazarabine.

2) Assess the qualitative and quantitative toxicities of bolus fazarabine administered on a daily x 5 schedule.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

<u>Date: 30 Oct 89 Proj No: SWOG 8925 Status: Ongoing</u>
Title: Evaluations of Cisplatin + VP-16 Followed by Mitotane at Progression if No Prior Mitotane or Cisplatin + BP-16 Only if Prior Treatment with Mitotane in Advanced and Metastatic Adrenal Cortical Carcinoma.

Est Comp Date:
Facility:
Brooke Army Medical Center
Associate Investigators:
Est Accumulative
OMA Cost:
orting Period: 0
ate: 0
Results Continue

Objective(s): 1) To evaluate the response and response duration of patients with:

- adrenocortical carcinoma treated with combination chemotherapy consisting of cisplatin and etoposide, and
- of those who receive mitotane after progression on the above chemotherapy (if no prior treatment with mitotane).
- 2) To evaluate the qualitative and quantitative toxicities of these therapies.
- 3) To evaluate and compare tumor morphology of patients with this rare tumor.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: / Nov 89 Proj No:	POG //99 Status: Ongoing				
Title: Rare Tumor Registry for Childh					
Start Date 25 Sep 81	Est Comp Date:				
Principal Investigator (vice Thomas)	Facility Brooke Army Medical Center				
Allen R. Potter, LTC, MC					
Dept/Svc	Associate Investigators:				
Department of Pediatrics	_				
Key Words:	7				
Solid tumor malignancies					
Accumulative MEDCASE	Est Accumulative				
Cost:	OMA Cost:				
Number of Subjects Enrolled During Rep	orting Period: 0				
Total Number of Subjects Enrolled to D					
Date of Periodic Review 13 Feb 89	Results Continue				
	history data on malignancies which occur s cannot be accumulated any single insti-				

2) To evaluate therapies in those groups of rare tumors in which fair numbers of cases can be accrued.

Technical Approach: Any child under the age of 18 years at diagnosis with a rare solid tumor is eligible for the study.

Progress: One patient remains on this study. No reportable data are available.

Date: / Nov 89 Proj N	o: POG 8104 Status: Ongoing
•	ild with Neuroblastoma: A Stage and Age
Oriented Study, Phase III.	
Start Date 27 Jan 83	Est Comp Date:
Principal Investigator	Facility
Paul J. Thomas, M.D., COL, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	Allen R. Potter, LTC, MC
Key Words:	
Neuroblastoma	
	•
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During R	Reporting Period: 1
Total Number of Subjects Enrolled to	• • • • • • • • • • • • • • • • • • • •
Date of Periodic Review 13 February	
Objective(s): 1) To treat the tumo	or according to age and stage at which the
tumor was diagnosed.	

2) To reduce later complications by separating by age and stage those patients that require surgery only; surgery and chemotherapy; surgery, chemotherapy, and radiation therapy.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Two patients remain on the study. Three have been transferred to other areas. One patient transferred here on this study relapsed.

Date: 7 Nov 89 Proj N	lo: POG 8304 Status: Ongoing
Title: SIMAL #4. Combination Chemo	therapy for Remission Induction and Mainte-
nance for: 1) Recurrent Childhood L	ymphocytic Leukemia After Elective Cessation
of Therapy; 2) Children with Occult	Testicular Leukemia After 3 Years of
Continuous Complete Remission.	
Start Date 27 Jan 84	Est Comp Date:
Principal Investigator	Facility
Paul J. Thomas, M.D., COL, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	Allen R. Potter, LTC, MC
Key Words:	
Leukemia, lymphocytic	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During R	leporting Period: 0
Total Number of Subjects Enrolled to	Date: 0
Date of Periodic Review 13 February	1989 Results Continue

Objective(s): 1) To compare the effectiveness of two regimens of cyclic maintenance chemotherapy in children with ALL, who relapse 6 months or greater, after elective cessation of chemotherapy.

- 2) To evaluate the effectiveness of prophylactic intrathecal chemotherapy, during the second remission.
- 3) To compare the effectiveness of two regimens of cyclic maintenance chemotherapy in patients with testicular leukemia.
- 4) To determine the effectiveness of two regimens of cyclic maintenance chemotherapy in children with isolated CNS relapse.

Technical Approach: Patients less than 21 years of age with pathologic verification of leukemic relapse at any site more than six months after elective cessation of initial therapy are eligible. Children with their first CNS relapse are also eligible for this study.

Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered on this study.

Date:	8 Nov 89			Proj	No:	POG 83	315	Status: Ongoing	•
Title:	Laboratory	Study	and	Subcla	assif	ication	n of	Non-Hodgkin's Lymphoma.	•

Start Date 25 Sep 84	Est Comp Date:			
Principal Investigator	Facility			
Paul J. Thomas, M.D., COL, MC	Brooke Army Medical Center			
Dept/Svc	Associate Investigators:			
Department of Pediatrics	Allen R. Potter, LTC, MC			
Key Words:				
Lymphoma, Non-Hodgkin's				
Accumulative MEDCASE	Est Accumulative			
Cost:	OMA Cost:			
Number of Subjects Enrolled During Repo	orting Period: 1			
Total Number of Subjects Enrolled to Date: 2				
Date of Periodic Review 13 February 1989 Results Continue				

Objective(s): 1) To provide a mechanism for the group wide study of biologic characteristics of lymphoma cells, by acquisition and coordination of data from reference laboratories.

- 2) To seek correlates of biologic charcteristics, with histopathology, clinical presentation, and end results of protocol therapies.
- 3) To attempt the development of a comprehensive classification of childhood NHL which is both clinically and biologically relevant.

Technical Approach: Patients less than 21 years of age with tumor tissue or cells available for study who are simultaneously being entered on open, frontend POG treatment protocols for NHL are eligible for this study.

Progress: Two patients have been entered on study with satisfactory samples for classification.

Date: 7 Nov 89 Proj No: POG 8340 Status: Ongoing
Title: Allogeneic or Autologous Bone Marrow Transplantation (BMT) for Stage D
Neuroblastoma: A POG Pilot Study

Start Date 12 Aug 85	Est Comp Date:		
Principal Investigator (vice Thomas)	Facility		
Allen R. Potter, LTC, MC,	Brooke Army Medical Center		
Dept/Svc	Associate Investigators:		
Department of Pediatrics/Medicine	Walter H. Harvey, D.O., MAJ, MC		
Key Words:	John J. Posch, Jr.		
Transplantation, bone marrow, autologous	Barbara Reeb		
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During Rep	oorting Period: 3		
Total Number of Subjects Enrolled to E	Date: 18		
Date of Periodic Review 13 February 1989 Results Continue			

Objective(s): 1) To determine the response rate and duration of patients aged > 1 year with metastatic (Stage D) neuroblastoma to intensive chemotherpay and fractionated total body irraadiation followed by allogeneic or autologous bone marrow transplantation (BMT) performed in first clinical remission.

- 2) To determine the response rate and duration using the same regimen in patients with Stage D neuroblastoma who fail to respond to, or recur after, conventional chemotherapy.
- 3) To determine the toxicity of the above regimen.

Technical Approach: This pilot study tests the efficacy and toxicity of high dose melphalan and fractionated total body irradiation supported by allogeneic or autologous BMT for neuroblastoma in first clinical remission or following relapse.

Bone marrow aspiration and therapy will follow the schema outlined in the study protocol.

Progress: Eighteen patients have been transplanted. There have been 4 early deaths, 13 successful engraftments, and 1 partial engraftment. Overall disease free survival is 6/18 (33%). Overall survival is 7/18 (39%). Disease free survival for patients transplanted when in complete response 3/7 (43%) and 3/11 (27%) for patients transplanted not in complete response.

Date: 7 Nov 89	Proj No: POG 8398 Status: Ongoing
Title: Up-front Alternating (Childhood	hemotherapy for Acute Lymphocytic Leukemia in
Start Date: 12 Jun 89	Est Comp Date:
Principal Investigator	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	6
Key Words:	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled Du	ring Reporting Period: 0
Total Number of Subjects Enrol	
Date of Periodic Review	Results
of alternating intensive chemo	e toxicity and complications, short and long to therapy pairs in children with acute lymphocyt he intensive chemotherapy pairs are: 6-MP/MTX a-C.

Technical Approach: To be eligible for this study, patients must be registered on POG 8600. Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered on the study.

	Proj No: POG 8451	Status: Ongoing
Title: Intergroup Rhabdomyosa	rcoma Study III	
Start Date 1 Feb 85	Est Comp Date	:
Principal Investigator (vice T Allen R. Potter, LTC, MC	homas) Brooke Army Mo	edical Center
Dept/Svc Department of Pediatrics	Associate Inv	
Key Words: Rhabdomyosarcoma		
Accumulative MEDCASE	Est Accumulat	ive
Cost: Number of Subjects Enrolled Du	OMA Cost:	0
Total Number of Subjects Enrol		
Date of Periodic Review 13 Fe	bruary 1989 Resul	ts Continue
Objective(s): To compare vari favorable and non-favorable hi	• •	rhabdomyosarcoma based or

Technical Approach: Patients under 21 years of age with the diagnosis of rhab-domyosarcoma or undifferentiated sarcoma, type indeterminate, or extraosseous Ewing's sarcoma, are eligible.

Therapy will follow the schema outlined in the study protocol.

Progress: One patient died after multiple relapses of the tumor. One patient continues to to do well.

POG 8493

Status:

Ongoing

Proj No:

Date:

7 Nov 89

Title: Infant Leukemia Protocol				
Start Date 26 Mar 85	Est Comp Date:			
Principal Investigator (vice Thomas)	Facility			
Allen R. Potter, LTC, MC	Brooke Army Medical Center			
Dept/Svc	Associate Investigators:			
Department of Pediatrics				
Key Words:	7			
Leukemia				
Accumulative MEDCASE	Est Accumulative			
Cost:	OMA Cost:			
Number of Subjects Enrolled During Repo	orting Period: 0			
Total Number of Subjects Enrolled to Da	ite: 0			
Date of Periodic Review 12 February 19				
Objective(s): 1) To establish the qua	litative and quantiative toxicity of thi			

regimen in infants and to determine criteria for dose modification in infants.

2) To obtain an estimate of survival and disease-free survival in infants <12 months of age treated with intensive chemotherapeutic regimen.

Technical Approach: Patients with ALL (or undifferentiated leukemia) ≤12 months of age at diagnosis are eligible. All patients must comply with immunologic and cytogenetic criteria for diagnosis according to POG front line ALinC classification studies and must be registered on that study as well as this protocol.

Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered into this study.

Date:								POG 84				Status:	020	going	
Title:	A	Phase	I	Study	of	Hyperfr	act	ionation	in	Brain	Stem	Gliomas	in	Child	ren

Start Date: 12 Jun 89	Est Comp Date:
Principal Investigator	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	•
Key Words:	1
Brain stem gliomas	i
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Repo	orting Period: 0
Total Number of Subjects Enrolled to Da	ate: 0
Date of Periodic Review	Results

Objective(s): 1) To test the feasibility of treating children with brain stem gliomas with hyperfractionated (twice daily) radiotherapy.

- 2) To study the immediate and late side effects of such treatment.
- 3) To test the feasibility of escalation of the dose of radiotherapy in this situation.
- 4) To monitor the response of the patients in terms of tumor regression, disease free interval, and length of survival.

Technical Approach: Patients >3 and <21 years of age with a previously untreated tumor arising in the mesencephalon, pons, including the cerebellar peducles and floor of the IVth ventrical, and medulla oblongata and with a life expectancy of greater than 6 weeks, shall be eligivel for inclusion in this study. Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered on the study.

Proj No: POG 8532	Status: Ongoing
nial Ependymomas	
	<u>e:</u>
Pick) Facility	
Brooke Army	Medical Center
Associate In	
Allen R. Pot	ter, LTC, MC
	,
1	
,	
1	
Est Accumula	tiva
i i	C146
lled to Date: 0	
ebruary 1988 Resu	lts Continue
e occurrence of subarac	hnoid seeding in children
	Est Comp Dat Pick) Facility Brooke Army Associate In Allen R. Pot Est Accumula OMA Cost: uring Reporting Period: lled to Date: 0 ebruary 1988 Resu

Technical Approach: Patients ≥ 24 months and ≤ 21 years with histologically confirmed primary intracranial ependymomas or ependymoblastoma are eligible.

with well differentiated, IVth ventricular epndymoma following resection and

Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered.

posterior foss irradiation.

Date: 7 Nov 89	Proj No:	POG 8552	Status:	Ongoing
Title: A Case-Control Study o	of Childhoo	d Rhabdomyosai	coma	
Start Date 31 May 85		Est Comp Date:	:	
Principal Investigator (vice		Facility		
Allen R. Potter, LTC, MC	i	Brooke Army Me	edical Center	
Dept/Svc Department of Pediatrics Key Words:		Associate Inve		
Rhabdomyosarcoma				
Accumulative MEDCASE Cost:		Est Accumulati	ive	
Number of Subjects Enrolled Du Total Number of Subjects Enrol Date of Periodic Review 13 F	lled to Dat	ting Period:_ e: l	0 ts Continue	
Objective(s): 1) To evaluate		onships betwee	en environment	al exposures

- 2) To evaluate associations between gestational factors and childhood RMS.
- 3) To evaluate the role of genetic factors in the etiology of childhood RMS.
- 4) To develop new methods for using subjects from collaborative cancer clinical trials for etiologic research.

Technical Approach: This is a case-control study of childhood RMS which will identify its cases from a large national collaborative clinical trial. The study will reexamine several promising hypotheses suggested by the preliminary study of RMS.

Progress: No reportable data are available.

Date: 7 Nov 89

	PUG 0001 Status: Ungoing			
Title: Phase II Study of 6-Mercaptopu	rine Administered as an Intravenous			
Infusion for Malignant Solid Tumors an	d Acute Leukemia			
Start Date 2 Aug 85	Est Comp Date:			
Principal Investigator (vice Thomas)	Facility			
Allen R. Potter, LTC, MC	Brooke Army Medical Center			
Dept/Svc	Associate Investigators:			
Department of Pediatrics				
Key Words:				
Solid Tumors				
Acute leukemia				
	<u> </u>			
Accumulative MEDCASE	Est Accumulative			
Cost:	OMA Cost:			
Number of Subjects Enrolled During Rep	oorting Period: 0			
Total Number of Subjects Enrolled to I	Date: 0			
Date of Periodic Review 13 February 1	989 Results Continue			
Objective(s): 1) To determine respon	ise rate of children with advanced			
malignath disease for whom no effective anti-cancer therapy is known to treat-				
ment with 6-mercaptopurine (6-MP) administered as a 48 hour IV infusion.				

2) To further assess the toxicity in a larger group of children.

Technical Approach: Patients must be ≤ 21 years of age with a measurable solid tumor or acute leukemia with either an M3 marrow or extra medullary disease. The diagnosis must be confirmed by appropriate histologic examination.

Progress: No patients have been entered into this study.

	7 Nov 89	Proj No: POG 8600/01/02	Status:	Ongoing
Title:	Evaluation	of Treatment Regimens in Acute Lymphoid	Leukemia	in Childhood
(AlinC	#14) - A Ped	iatric Oncology Group Phase III Study		

Start Date 28 Mar 86	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	_
Key Words:	7
Leukemia, lymphoid	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	porting Period: 0
Total Number of Subjects Enrolled to I	
Date of Periodic Review 13 February 1	

Objective(s): 1) To test the concept that intensive asparaginase (ASP) therapy, designed to maintain low asparagine levels for the first six months of maintenance will improve the outcome of patients with standard risk acute lymphocytic leukemia (ALL) when added to pulses of intermediate dose methotrexate (MTX), as compared to intensification with IDM alone.

- 2) To study the effectiveness in standard risk patients of intensification with a potentially synergistic or additive drug pair, i.e., IDM plus AraC, as compared to that of intensification with IDM pulses alone.
- 3) To determine if administering a pulse of IDM + AraC at 3 week intervals during the first 4 months of complete remission in children with ALL is superior to administering the same number of IDM + AraC pulse at 23-week intervals during the first 2 years of complete remission in children with ALL with either "lower" or "higher" risk of relapse.
- 4) To obtain further information on the immediate and delayed toxicity of the continuation of chemotherapy program that incorporates these combinations of MTX and AraC or MTX and ASP in moderately high doses.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: All patients entered remain in remission.

Date: 7 Nov 89 Proj No: POG 8615 Status: Ongoing
Title: A Phase III Study of Large Cell Lymphomas in Children and Adolescents:
A Comparison of Two Treatment Regimens - ACOP+ vs AOP

Start Date 19 Dec 86	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	7
Lymphoma	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	
Total Number of Subjects Enrolled to I	· · · · · · · · · · · · · · · · · · ·
Date of Periodic Review 13 February	

Objective(s): 1) To determine the influence of alkylating agent (cyclophos-phamide) therapy in advanced-stage large cell lymphomas in children and adolescents, by comparing in a randomized prospective study the efficacy and toxicity of a modified ACOP+ versus a modified APO regimen.

- 2) To reduce the adverse effects of treatments by elimination of involved field and cranial radiation in the treatment of large cell lymphomas.
- 3) To evaluate the adequacy of one year of total therapy for advanced large cell Non-Hodgkin's lymphoma (NHL).
- 4) To study clinical pathologic patterns and biologic characteristics of large cell lymphomas in children and adolescents.

Technical Approach: Previously untreated patients under 21-years of age, available for periodic follow-up are eligible for this study.

Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered to date.

Date: 7 Nov 89	Proj No: POG 8616	Status: Ongoing
Title: Intensive Chemotherapie (DU NHL Burkitt and Non-Burkitt	es for Stage III Diffus	e Undifferenti ated Lymp hom
Start Date 19 Dec 86	Est Comp Date	:
Principal Investigator (vice The Allen R. Potter, LTC, MC	nomas) Facility	edical Center
Dept/Svc Department of Pediatrics Key Words: Lymphoma	Associate Inv	estigators:
Accumulative MEDCASE Cost:	Est Accumulat OMA Cost:	
Number of Subjects Enrolled Dur Total Number of Subjects Enroll	led to Date: 0	
Date of Periodic Review 13 H	Pebruary 1989 Resul	ts Continue
Objective(s): 1) To achieve ovival) in a majority of patient	chemotherapeutic cure (two-year disease-free sur- L.

- 2) To determine if a new regimen, Total Therapy B, is superior to high-dose Cytoxan, high-dose methotrexate for patients with Stage III DU NHL.
- 3) To study potential interaction between treatment and LDH.

Technical Approach: Previously untreated patients under 21 years of age with a diagnosis of diffuse, undifferentiated non-Hodgkin's lymphoma, small non-cleaved cell (Burkitt or non-Burkitt), Stage III by Murphy's system will be eligible.

Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered to date.

Date: 7 Nov 89 Pro	j No: POG 8617 Status: Ongoing
Title: Therapy for B-Cell Acute Undifferentiated Lymphomas	Lymphoblastic Leukemia and Advanced Diffuse
Start Date 19 Dec 86	Est Comp Date:
Principal Investigator (vice Tho	mas) Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Leukemia, acute lymphoblastic	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled Durin	
Total Number of Subjects Enrolled	
Date of Periodic Review 13 Febr	

Objective(s): 1) To estimate the complete remission (CR) rate in patients with Stage IV diffuse undifferentiated non-Hodgkin's Lymphoma (DU NHL) and B-Cell acute lymphocytic leukemia (B-ALL) with a new schedule of administration of 3 active agents: "split-dose" cycolophosphamide (cyclo) - Adriamycin (Adria) + vincristine (VCR).

- 2) To estimate the chemotherapeutic cure rate in Stage IV DU NHL and B-ALL with a brief (6 month) intensive rotational chemotherapy program designed to confer greater protection against central nervous system (CNS) disease and marrow relapse.
- 3) To estimate the reinduction rate and disease-free survival rate for patients in relapse with non-lymphoblastic lymphoma.

Technical Approach: Patients must be under 21 years of age at time of initial diagnosis in order to be eligible for this study.

Therapy will follow the schema outlined in the study protocol.

Progress: One patient entered on study had an initially good response but relapsed after about six months and died.

	POG 8622 Status: Ongoing
Title: Evaluation of Retinoic Acid in Leukemia	Pediatric Patients with Non-lymphocytic
Deckemia	
Start Date 27 Mar 87	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	7
Leukemia, non-lymphocytic	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	porting Period: 0
Total Number of Subjects Enrolled to I	Date: 0
Date of Periodic Review 13 February	
Objective(s): 1) To determine the ef	fectiveness and further assess the toxi-

2) To explore the association of RA-induced differentiation in vitro with the response to RA in vivo if there is evidence of response in patients with ANLL.

city of 13-cis retinoic acid (RA) in the treatment of children with acute non-

Technical Approach: Patients under 21 years of age at time of diagnosis who have ANLL in bone marrow relapse who have been resistant to other forms of therapy are eligible.

Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered to date.

lymphocytic leukemia (ANLL).

Date: 7 Nov 89 Proj No:	POG 8625/26 Status: Ongoing
Title: Combined Therapy and Restaging	in the Treatment of Stages I, IIA, and
IIIA ₁ Hodgkin's Disease in Pediatric P	atients
Start Date 30 Jul 86	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Hodgkin's disease	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	orting Period: 0
Total Number of Subjects Enrolled to D	
Date of Periodic Review 13 February 1	
cycles of MOPP/ABVD plus low dose radi	ctiveness of 3 cycles of MOPP/ABVD vs 2 ation therapy in terms of duration or one cycle = 1 course MOPP and 1 course of

ABVD) in children with early stage Hodgkin's disease.

2) To compare the incidence and severity of acute/long-term toxicity of

MOPP/ABVD vs MOPP/ABVD plus involved field, low dose radiation therapy.

- 3) To evalute the incidence of CR after 2 cycles of MOPP/ABVD.
- 4) To search for prognostic factors that may correlate with duration of survival.
- 5) To determine the salvage rate of patients who fail to respond to 2 cycles of MOPP/ABVD or who fail to achieve a CR after completion of prescribed therapy.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: One patient has completed treatment and continues to do well.

Date:	7 Nov 89	Proj No: POG 8631	Status: Ongoing
Title:	Medulloblastoma Favo	rable Prognosis: Randomized	Study of Reduced Dose
Irradia	tion to Brain and Spi	nal Contents vs Standard Do	se Irradiation - A
Phase I	II Study.		

Start Date 27 Mar 87	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen'R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	7
Medulloblastoma	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	porting Period: 0
Total Number of Subjects Enrolled to I	
Date of Periodic Review 13 February	

Objective(s): 1) To determine patterns of recurrence, disease free survival, and survival in patients with favorable prognosis medulloblastoma who receive a neuraxis dose of 2340 rad compared to those who recieve 3600 rad.

- 2) To study the quality of survival obtained by decreasing the dose of radiotherapy to cerebrum and spinal cord.
- 3) To evaluate prospectively the central nervous system (CNS) functions of these children with IQ tests, CT scans, neurological examinations, psychometric testing and neuroendocrine tests.

Technical Approach: Patients ≥ 36 months and ≤ 21 years of age at diagnosis are eligible. Patients must have no evidence of dissemination beyond the posterior fossa confirmed by myelogram, chest x-ray, bone scan, bone marrow and CSF exam, i.e. M_0 .

Therapy will follow the schema outlined in the study protocol.

Progress: No patients entered to date.

Date:	7 Nov 89		Proj No:	POG 8633/34	Status: Ongoing
Title:	Treatment	of Children	3 years	of Age with Mali	gnant Brain Tumors Using
Postoper	rative Chem	notherapy and	Delayed	Irradiation.	

Start Date 27 Mar 87	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	porting Period: 0
Total Number of Subjects Enrolled to I	
Date of Periodic Review 13 February 1	

Objective(s): 1) To determine if the use of postoperative chemotherapy in children less than 36 months of age with malignant brain tumors will allow for the delay of cranial irradiation for 12 months in children 2-3 years at diagnosis and 24 months for those <2 years old.

- 2) To estimate the response (CR or PR) to two cycles of cyclophosphamide and vincristine in children with measurable tumor at the initiation of chemotherapy.
- 3) To estimate the objective response rate (CR, PR, SD) and disease control interval with this multi-agent chemotherapy regimen.

8634 - To estimate the response rate, disease control interval, recurrence-free survival and survival of those children who, after having progression of disease on chemotherapy (#8633), are subsequently treated with surgery and radiation therapy or radiation therapy alone.

Technical Approach: Inclusion-exclusion criteria and therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered to date.

	POG 8638 Status: Ongoing
Title: Randomized Phase II Study of C ment of Children with Progressive or R	arboplatin (CBCDA) vs CHIP in the Treat- ecurrent Brain Tumors
Start Date 19 Dec 86	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc Department of Pediatrics Key Words: Brain tumor	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
	ate: 0

2) To compare the toxicities associated with the use of each agent.

Technical Approach: To be eligible for this study, the patient must be ≤ 21 years of age at initial diagnosis, with a recurrent or progressive brain tumor, and who has not been entered on more than one phase II new agent study.

Therapy will follow the schema outlined in the study protocol.

Progress: No patients entered to date.

POG 8650

Status:

Ongoing

Proj No:

7 Nov 89

Date:

Start Date 19 Dec 86	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Wilms' tumor	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	porting Period: 2
Total Number of Subjects Enrolled to D	Date: 3
Date of Periodic Review 13 February 1	1989 Results Continue

Objective(s): To gain a better understanding of the Wilms' tumor by gathering detailed information regarding gross and histologic morphology and to correlate this information with treatment and clinical outcome.

Technical Approach: Patients will be randomized according to stage and histology.

Therapy will follow the schema outlined in the study protocol.

Progress: One patient entered as a "followed" patient because the primary was non-resectable. Two additional patients were transferred here as "followed" patients. Two patients have relapsed while on therapy.

Date: 7 Nov 89 Proj No:	POG 8651 Status: Ongoing
Title: Osteosarcoma #2: A Randomized Immediate Surgery and Adjuvant Chemoth Osteosarcoma.	Trial of Pre-Surgical Chemotherapy vs erapy in the Treatment of Non-Metastatic
Start Date 27 Mar 87	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc Department of Pediatrics Key Words: Osteosarcoma	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Rep	orting Period: 0
Total Number of Subjects Enrolled to D	ate: 0
Date of Periodic Review 13 February 1	989 Results Continue

Objective(s): To determine whether chemotherapy administered prior to and after the definitive surgery of the primary tumor can improve the disease-free and/or overall survival of patients with non-metastatic osteosarcoma of the extremity or resectable bone when compared to the traditional approach of surgical treatment of the primary tumor followed by adjuvant chemotherapy.

Technical Approach: To be eligible for this study, the patient must be under 30 years of age, have no prior history of cancer and no prior therapy other than biopsy.

Therapy will follow the schema outlined in the study protocol.

Date: 7 Nov 89 Proj	No: POG 8653/54 Status: Ongoing
Title: A Study of Soft Tissue Sar Variants	rcomas Other than Rhabdomyosarcoma and Its
Start Date 30 Jul 86	Est Comp Date:
Principal Investigator (vice Thoma	as) Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	
Total Number of Subjects Enrolled	
Date of Periodic Review 13 Februa	

Objective(s): 1) To determine whether adjuvant chemotherapy with vincristine, Adriamycin, cyclophosphamide, and actinomycin D (VACA) increases the relapse-free survival (RFS) of patients with localized soft tissue sarcoma (STS) who are in complete response (CR) status after surgery with or without postoperative radiation.

2) To compare VACA with VACA plus DTIC (VACAD) therapy in regard to CR and RFS rates in patients with: (a) metastatic STS at diagnosis or (b) previously "untreated" recurrent STS (patients on the no chemotherapy control arm of "adjuvant" study 8653) or (c) localized persistent gross residual sTS after surgery and radiation therapy.

Technical Approch: Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered to date.

	/ Nov 88		POG 8661	Status: Ongoing
Title:	Evaluationof CHIP	in Malignant	Solid Tumors, A P	hase II Study
Start D	ate 27 Mar 87		Est Comp Date:	
	al Investigator (vi	ce Thomas)	Facility	
	. Potter, LTC, MC	cc 1110mg0,	Brooke Army Medi	cal Center
Dept/Sv			Associate Invest	
Departm	ent of Pediatrics			
Key Wor			1	
A 1	ative MEDCASE	***************************************	Est Accumulative	
	acive MedCASE		N .	•
Cost:	of Subjects Enrolle	d Dumina Pas	OMA Cost:	
	umber of Subjects E	• •		
nate or	Periodic Review_1	3 repruary 1	kesults_	Continue
<u>Objecti</u>	ve(s): 1) To eval	uate the res	ponse rate to CHIF	o in patients with

2) To evaluate the toxicity of CHIP in these patients.

Technical Approach: To be eligible for this study, the patient must be ≤ 21 years of age, have a life expectancy of ≥ 4 weeks and absence of significant uncontrolled infection.

Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered to date.

POG 8691

Proi No:

Date:

7 Nov 88

	POG 8691	Status:	Ongoing
7			
			
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	, ,		
	Brooke Army N	Medical Center	
	Associate Inv	estigators:	
	Allen R. Pott	er, LTC, MC	
	For Accumulat		
	1	.146	
•	_	0	
colled to Da	te: 2		
February 19	89 Resul	lts Continue	
	· 	<u></u>	
	During Repo	Est Comp Date Facility Brooke Army M Associate Inv Allen R. Pott Est Accumulat OMA Cost: During Reporting Period: rolled to Date: 2	Est Comp Date: Facility Brooke Army Medical Center Associate Investigators: Allen R. Potter, LTC, MC Est Accumulative OMA Cost: During Reporting Period: 0 rolled to Date: 2

Objective(s): 1) To determine the toxicity and complications associated with the administration of this intensive chemotherapy regimen to children with T-ell leukemia and advanced stage T-cell lymphoma.

2) To determine the feasibility of using this chemotherapy regimen as the backbone of a randomized groupwide T-cell study evaluating intensive L-asparaginase therapy.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Two patients have been entered. On patient achieved remission but relapsed after about one year. The other patient remains on therapy with good response.

This study has been closed to new entries; however, it remains open for followup and continued therapy of the one patient who has responded.

Date: 7 Nov 89 Proj No	o: POG 8693 Status: Completed
Title: VP-16, AMSA + 5-Azacytidine in	n Refractory ANLL
Start Date 27 Mar 87	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Re Total Number of Subjects Enrolled to	
Date of Periodic Review 13 February	
Objective(s): 1) To determine the to patients with refractory ANLL.	oxicity of VP-16, AMSA combination on

2) To determine the toxicity of the three drug combination - VP-16, AMSA and 5-Azacytidine.

Technical Approach: Patients with ANLL < 21 years of age at the time of initial diagnosis who have either failed to respond to induction therapy or who have relapsed will be eligible.

Therapy will follow the schema outlined in the study protocol.

Progress: No patients entered on this study.

Date:		Nov 89				No:				Status:	Ongoing	_
Title:	A	POG Pilot	Study	of	Front	Loadi	ng (Chemotherapy	in	Children	with	_
Increase	d	Risk Medul	lloblas	tor	na							

Start Date 19 Dec 86	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	7
Medulloblastoma	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	porting Period: 0
Total Number of Subjects Enrolled to I	
Date of Periodic Review 13 February 1	

Objective(s): 1) To evaluate the feasibility and acute toxicity of chemotherapy prior to radiation therapy in the treatment of newly diagnosed children with medulloblastoma who are at increased risk for recurrence.

- 2) To measure tumor response to the entire chemotherapy regimen of cis-platinum, vincristine, and high-dose cyclophosphamide prior to irradiation.
- 3) To evaluate the feasibility of a centralized rapid neuroradiology review of pre-study CT scans and myelograms in determining patient eligibility.

Technical Approach: To be eligible for this study, patients must be >3 years and <21 years of age and must have presence of advanced medulloblastoma.

Therapy will follow the schema outlined in the study protocol.

Progress: No patient have been entered to date.

POC 8696/97

Status

Ongoing

Proi No:

7 Nov 80

Date:

Title: Treatment of Hepatoblastoma (HI	3) with Surgery and Chemotherapy and			
Radiation Therapy				
Start Date 30 Jul 86	Est Comp Date:			
Principal Investigator (vice Thomas)	Facility			
Allen R. Potter, LTC, MC	Brooke Army Medical Center			
Dept/Svc	Associate Investigators:			
Department of Pediatrics	1			
Key Words:	1			
Hepatoblastoma				
Accumulative MEDCASE	Est Accumulative			
Cost:	OMA Cost:			
Number of Subjects Enrolled During Repo				
Total Number of Subjects Enrolled to Da	ate:0			
Date of Periodic Review 13 February 19	989 Results Continue			
Objective(s): 1) To obtain preliminar	ry data on the natural disease course of			

- patients with carefully staged, completely resected, "favorable histology" hepatoblastoma, given no further therapy after surgery.
- 2) To obtain preliminary data on the toxicity of a combination of cis-platin, vincristine and 5-fluorouracil (DDP/VCR/5-FU) in the treatment of patients with hepatoblastoma.
- 3) To assess tumor response to DDP/VCR/5-FU in those patients with Stage III and IV hepatoblastoma.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: No reportable data are available at this time.

Date: 7 Nov 89 Proj No:	POG 8704 Status: Ongoing		
Title: T-Cell #3 Protocol - A POG Phas	se III Study		
Start Date 3 Sep 87	Est Comp Date:		
Principal Investigator (vice Thomas)	Facility		
Allen R. Potter, LTC, MC	Brooke Army Medical Center		
Dept/Svc	Associate Investigators:		
Department of Pediatrics	_]		
Key Words:			
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During Repo			
Total Number of Subjects Enrolled to Da			
Date of Periodic Review 13 February 1			
Objective(s): 1) To estimate the disementherapy regimen designed to be particular derived lymphoid malignancies in child lymphoma and T-cell acute lymphoblastic	cularly effective for patients with T-cel ren with advanced stage lymphoblastic		

2) To determine the efficacy of adding intensive high-dose L-asparaginase to the backbone chemotherapy regimen in an attempt to improve disease-free survival.

Technical Approach: Patients <21 years and >12 months with a diagnosis of ALL or patients age <21 years with a diagnosis of lymphoblastic lymphoma will be eligible.

Therapy will follow the schema outlined in the study protocol.

Progress: One patient with lymphoblastic lymphoma was entered, has achieved a satisfactory remission, and remains on treatment.

Date: 7 Nov 89 Proj N	No: POG 8710 Status: Ongoing
Title: Protocol for Second Induction Lymphoblastic Leukemia (SIMAL #5)	on and Maintenance in Childhood Acute
Start Date 29 Jul 88	Est Comp Date:
Principal Investigator (vice Thomas Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc Department of Pediatrics Key Words:	Associate Investigators:
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During I Total Number of Subjects Enrolled to	o Date:
Date of Periodic Review	Results
Objective(s): 1) To compare disease MTX/VM-26 with a control regimen.	e-free survival of a regimen including

2) To compare disease-free survival of a regimen including IFN with a control regimen.

Technical Approach: Therapy will follow the schema outlined in the study protocol

Date: 7 Nov 89 Proj 1	No: POG 8719 Status: Ongoing
• •	without Maintenance for the Treatment of
Localized Non-Hodgkin's Lymphoma	
Start Date 25 Sep 87	Est Comp Date:
Principal Investigator (vice Potter) Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Lymphoma, Non-Hodgkin's	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	Reporting Period: 0
Total Number of Subjects Enrolled t	o Date: 0
Date of Periodic Review_ 13 Februar	y 1989 Results Continue

Objective(s): 1) To determine if 24 weeks of maintenance chemotherapy with daily oral 6-MP and weekly methotrexate contributes to relapse-free survival and survival for patients with localized non-Hodgkin's lymphoma when aadded to a 9 week induction and consolidation regimen as administered in 8314.

2) To maintain a high cure rate with minimum toxicity for children with localized non-Hodgkin's lymphoma in favorable sites.

Technical Approach: Patients <21 years of age at time of diagnosis will be eligible.

Therapy will follow the schema outlined in the study protocol.

POG 8725

Status:

Ongoing

Proj No:

Title: Randomized Study of Intensive	Chemotherapy (MOPP/ABVD) +/- Low Dose			
Total Nodal Radiation Therapy in the Treatment of Stages IIB, IIIA2, IIIB, and				
IV Hodgkin's Disease in Pediatric Pati				
Start Date 29 Jul 88	Est Comp Date:			
Principal Investigator (vice Thomas)	Facility			
Allen R. Potter, LTC, MC	Brooke Army Medical Center			
Dept/Svc	Associate Investigators:			
Department of Pediatrics				
Key Words:	7			
	ļ			
	<u> </u>			
Accumulative MEDCASE	Est Accumulative			
Cost:	OMA Cost:			
Number of Subjects Enrolled During Rep	orting Period: 0			
Total Number of Subjects Enrolled to D	ate: 0			
Date of Periodic Review 13 February 1	——————————————————————————————————————			

Objective(s): To determine, in a randomized study, whether the addition of low dose total nodal radiation therapy (TNRT) in pediatric patients with Hodgkin's disease who have achieved a complete remission after receiving 4 courses of MOPP alternating with 4 courses of ABVD will improve the duration of complete remission and survival when compared to patients who have received chemotherapy alone.

To determine whether TNRT will significantly increase either acute toxicity or long-term morbidity when compared to MOPP/ABVD alone.

To determine the effect of chemotherapy as compared to chemotherapy plus TNRT on splenic function as determined by the pitted erythrocyte count using Nomarski optics.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: No patients entered to date.

Date:

7 Nov 89

Date: 7 Nov 89	Proj No: POG 8726	Status: Ongoing
Title: Alpha-Interferon in Disease, Phase II	Histiocytosis X and Other	Non-Malignant Histiocytic
Disease, Fnase II		
Start Date 25 Sep 87	Est Comp Date	:
Principal Investigator (vice	Thomas) Facility	
Allen R. Potter, LTC, MC	Brooke Army M	edical Center
Dept/Svc	Associate Inv	estigators:
Department of Pediatrics		
Key Words:		
Histiocytosis X		
Accumulative MEDCASE	Est Accumulat	ivo
Cost:	OMA Cost:	146
Number of Subjects Enrolled		0
Total Number of Subjects En		
Date of Periodic Review 13		ts Continue
Objective (a): 1) To evaluat		

Objective(s): 1) To evaluate the response rate of patients with histiocytosis X and related diseases to treatment with alpha interferon (A-IFN).

2. To determine the toxicities of d-IFN in children with histiocytosis X and related diseases.

Technical Approach: Eligible patients must have biopsy-proven diagnosis of reac tive histiocytosis and must be <21 years of age at time of protocol entry.

Therapy will follow the schema outlined in the study protocol.

Date: 7 Nov 89 Proj No: POG 8731 Status: Ongoing
Title: Phase II Study of Low-dose "Continuous" Oral Methotrexate in the
Treatment of Children with Progressive or Recurrent Brain Tumors.

Start Date 29 Jul 88	Est Comp Date:	
Principal Investigator (vice Thomas)	Facility	
Allen R. Potter, LTC, MC	Brooke Army Medical Center	
Dept/Svc	Associate Investigators:	
Department of Pediatrics		
Key Words:		
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost:	
Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to D Date of Periodic Review 13 February 1	ate: 0	

Objective(s): To determine the effectiveness of low-dose "continuous" oral methotrexate in the treatment of children with progressive or recurrent brain tumors and to evaluate the toxicity associate with the use of this agent given in this manner.

Technical Approach: Therapy will follow the schema outlined in the study protocol

Progress: No patients have been entered to date

Date:	7 Nov 89	Proj No:	POG 8739	Status: Ongoing
	Evaluation of Al in Children, Phas	•	in the Treatment	of Recurrent Brain

Start Date 25 Sep 87	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Brain tumor	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Reportation Number of Subjects Enrolled to Date of Subjects Enrolled to Date of Subjects Enrolled to Date of Subjects Enrolled to Date of Subjects Enrolled to Date of Subjects Enrolled to Date of Subjects Enrolled to Date of Subjects Enrolled During Reports E	~
Date of Periodic Review 13 February 1989 Results Continue	

Objective(s): 1) To determine the efficacy of alpha2-interferon (-IFN) in children with recurrent brain tumors resistant to standard therapy in regard to response rate of different histologic subtypes to -IFN.

2) To further assess the toxicity of -IFN in children.

Technical Approach: To be eligible for this study, patient must be <21 years of age with a biopsy-proven diagnosis of astrocytoma, malignant glioma, brainstem glioma, medulloblastoma or ependymoma with clear evidence of progression or recurrence.

Therapy will follow the schema outlined in the study protocol.

Date: 7 Nov 89 Proj No: POG 8741/42 Status: Ongoing
Title: Stage D NBL #3: Treatment of Stage D Neuroblastoma in Children >365 Days
at Diagnosis

Start Date 3 Sep 87	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	-
Key Words:	
Neuroblastoma	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Repo	orting Period: 0
Total Number of Subjects Enrolled to Da	ite: 0
Date of Periodic Review 13 February 1989 Results Continue	

Objective(s): To evaluate response rates and toxicity of four sequentially administered Phase II chemotherapy agents when given prior to conventional therapy in patients >365 days of age with Stage D (metastatic) neuroblastoma. The specific agents to be studied are: ifosfamide, carboplatin (CBDCA), cisdichloro-transdihydroxy-bis-platinum (CHIP), and epirubicin.

Technical Approach: Any patient with newly diagnosed metastatic (Stage D) neuroblastoma who is >365 days and <21 years of age, who has receive no previous chemotherapy or irradiation therapy, and who has measurable disease will be eligible.

Therapy will follow the schema outlined in the study protocol.

Progress: No patients from BAMC entered to date. One patient transferred here on study remains on study and has had a complete response.

Date: 7 Nov 89 Proj No:	POG 8743 Status: Ongoing
Title: Treatment in 'Better Risk' Neur Stage C, D, and DS (VS) <365 Days	coblastoma: POG Stge B (All Ages) and POG
Start Date 3 Sep 87	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Neuroblastoma	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Repo	~
Total Number of Subjects Enrolled to Da	
Date of Periodic Review 13 February 19	Results Continue
	

Objective(s): 1) To prospectively identify patients <365 days of age at diagnosis who will fail to achieve CR with cycophosphamide (CYC) and Adriamycin (ADR) and delayed surgery; then to alter therapy in these patients and evaluate the CR and survival rates with alternate therapy, using cis-platinum (CDDP) and VM-26.

2) To evaluate the disease-free survival (DFS) and survival in a larger group of patients currently considered to be "better risk" patients with neuroblastoma.

Technical Approach: Patient eligibility and therapy will follow the schema outlined in the study protocol.

	7 Nov 89				POG 8		Status:		
Title:	Low-Dose	Methotrexate i	in t	he Tr	eatmer	nt of	Rhabdomyosarcoma,	Phase	II

Start Date 25 Sep 87	Est Comp Date:	
Principal Investigator (vice Thomas)	Facility	
Allen R. Potter, LTC, MC	Brooke Army Medical Center	
Dept/Svc	Associate Investigators:	
Department of Pediatrics	-	
Key Words:	7	
Rhabdomyosarcoma	1	
Accumulative MEDCASE	Est Accumulative	
Cost:	OMA Cost:	
Number of Subjects Enrolled During Rej	porting Period: 0	
Total Number of Subjects Enrolled to I		
Date of Periodic Review 13 February 1989 Results Continue		

Objective(s): 1) To determine the response rate of children with rhabdomyosarcoma treated with low-dose methotrexate (LDMTX) given every 6 hours for 8 doses, followed by leucovorin rescue.

2) To determine the type and duration of toxicity of low-dose sustained oral methotrexate.

Technical Approach: To be eligible for entry into this study, patient must be <21 years of age and have biopsy-proven rhabdomyosarcoma unresponsive to standard therapy for which there is no known potentially curative therapy.

Therapy will follow the schema outlined in the study protocol.

Date: 7 Nov 89 Proj No:	POG 8759 Status: Ongoing
Title: The Effectiveness of Phase II	Agents in Untreated Metastatic Osteo-
sarcoma (MOS) or Unresectable Primary	Osteosarcoma vs Previously Treated
Recurrent Osteosarcoma	
Start Date 3 Sep 87	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Osteosarcoma	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	oorting Period: 0
Total Number of Subjects Enrolled to D	
Date of Periodic Review 13 February 1	

Objective(s): 1) To estimate the response rate to Ifosfamide in patients presenting with metastatic osteosarcoma or unresectable primary osteosarcoma prior to treatment of those patients with other chemotherapeutic reagents.

- 2) To estimate the response rate to Ifosfamide in previously treated patients with osteosarcoma.
- 3) To explore the feasibility and toxicity of the addition of Ifosfamide to a multi-agent combination chemotherapy regimen which includes drugs known to be active in the treatment of osteosarcoma.
- 4) To study the DNA content of primary and metastatic tumors.

Technical Approach: In order to be eligible for this study, patient must be <30 years of age with no prior history of cancer for Stratum 1 or no prior history of cancer other than osteosarcoma for Stratum 2.

Therapy will follow the schema outlined in the study protocol.

	POG 8/60 Status: Ongoing
Title: Trimetrexate in the Treatment	of Childhood Acute Leukemia, Phase II.
Start Date 29 Jul 88	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc Department of Pediatrics Key Words:	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to I Date of Periodic Review 13 February 1	Date: 0
Objective (a): To determine the remise	sion rate obtained with the administrati

Objective(s): To determine the remission rate obtained with the administration of trimetrexate to children with acute lymphoblastic or acute myelogenous leukemia which is retractory to standard therapy and to further evaluate the toxicity of trimetrexate in children.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 7 Nov 89 Proj No:	POG 8761 Status: Ongoing
Title: A Phase II Study of Homoharrin Refractory Non-Lymphoblastic Leukemia	gtonine for the Treatment of Children with
Start Date 25 Sep 87	Est Comp Date:
Principal Investigator (vice Thomas) Allen R. Potter, LTC, MC	Facility Brooke Army Medical Center
Dept/Svc Department of Pediatrics Key Words: Leukemia, non-lymphoblastic	Associate Investigators:
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to D Date of Periodic Review 13 February 1	Date: 0
Objective(s): 1) To evaluate the effi of refractory acute nonlymphoblastic l	cacy of Homoharringtonine for the therapy eukemia (ANLL) in children.

2) To assess the toxicity of Homoharringtonine in chidren.

Technical Approach: In order to be eligible for this study patients must be <21 years of age with a diagnosis of ANLL. They must have a life expectancy of >4 weeks and evidence of recovery from toxicity of prior therapy.

Therapy will follow the schema outlined in the study protocol.

Progress: No patients entered to date.

Date

Date: 7 Nov 89	Proj No:	POG 8763 Status: Ongoing
Title: Evaluation of Re Children with Resistant		cicity of Ifosfamide and VP-16-213 in ors
Start Date 3 Sep 87		Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC		Brooke Army Medical Center
Dept/Svc Department of Pediatrics		Associate Investigators:
Key Words:		
Accumulative MEDCASE Cost:		Est Accumulative OMA Cost:
		Town cost:
Number of Subjects Enrol	lad Duning Box	testine Desiral 2

Objective(s): To determine the antitumor activity and toxicity of ifosfamide (IFX) plus Etoposide (VP-16) against malignant solid tumors resistant to conventional chemotherapy.

Technical Approach: Eligible patients must be <21 years of age and have documented measurable disease, confirmed with appropriate histologic examination. Patients must have progressive or recurrent disease that is resistant to conventional therapy.

Therapy will follow the schema outlined in the study protocol.

Progress: Three patients have been entered on study. One patient with recurrent Ewing's sarcoma had no response. One patient with recurrent Wilms' tumor had an initial partial response then recurred. One patient with recurrent Wilms' tumor is too early to evaluate for response.

Date: 7 Nov 89 Proj No:	POG 8764 Status: Ongoing
Title: Chemotherapy Regimen for Early	and Initial Induction Failures in
Childhood Acute Lymphoblastic Leukemia	: Phase II Study
. ,	•
Start Date 29 Jul 88	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Rep	orting Period: 0
Total Number of Subjects Enrolled to D	ate: 0
Date of Periodic Review 13 February 1	

Objective(s): To estimate the complete remission rate for early and initial induction failures in childhood ALL based on an induction regiment of VM-26 and continuous infusion cytosine arabinoside (ara-C).

To estimate the one-year disease-free survival for early and initial induction failures in childhood ALL, based on a new regimen.

To try and better characterize this unique subpopulation of patients with primary drug resistnace using cDNA probes fot the multidrug-resistant phenotype and obtain an oncogene profile.

Technical Approach: Patient eligibility and therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered to date.

Date: 7 Nov 89	Proj No: POG 8788	Status: Ongoing
Title: Intergroup Rhabdomyosa Disease	arcoma Study IV Pilot Stud	y for Clinical Group III
Start Date: 13 May 89	Est Comp Date:	
Principal Investigator	Facility	
Allen R. Potter, LTC, MC	Brooke Army Med	ical Center
Dept/Svc	Associate Inves	tigators:
Department of Pediatrics		
Key Words:		
Rhabdomyosarcoma		
Accumulative MEDCASE	Est Accumulativ	'e
Cost:	OMA Cost:	
Number of Subjects Enrolled Du		l
Total Number of Subjects Enrol	lled to Date: 0	
Date of Periodic Review	Results	

Objective(s): 1) To determine the feasibility of, and toxicity associated with using vincristine-actinomycin D-ifosfamide (VAI) or vincristine-ifosfamie-etoposide (VIE) as induction and continuation chemotherapies.

- 2) To determine a dose of cyclophosphamide to be used in VAC therapy which will result in myelosuppression comparable to that experienced with the VAI regimen.
- 3) To determine the feasibility of/and toxicity associated with using a hyperfractionated radiotherapy program following induction chemotherapy in children above and below age 6.

Technical Approach: Patients <21 years of age at diagnosis with Clinical Group III pathologically-proven rhabdomyosarcoma or undifferentiated sarcoma, or extraosseous Ewing's sarcoma are eligible for this study. Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered on this study.

Date: 7 Nov 89	Proj No: Po	OG 8820	Status: Ongoing
Title: VP-16, AMSA+/1 5-Azacy	tidine in R	efractory ANLL,	Phase II/III
Start Date: 13 Mar 89	E	st Comp Date:	
Principal Investigator	F	cility	
Allen R. Potter, LTC, MC	В:	cooke Army Medi	cal Center
Dept/Svc Department of Pediatrics Key Words: Refractory ANLL	A	ssociate Invest	igators:
Accumulative MEDCASE	E	st Accumulative	·
Cost:	Ol	MA Cost:	
Number of Subjects Enrolled Du	ring Report:	ing Period: 0	
Total Number of Subjects Enrol	lled to Date	:_0	
Date of Periodic Review		Results	
Objective(s): 1) To compare	in a random	nized study th	a ramission rate of

Objective(s): 1) To compare, in a randomized study, the remission rate of VP-16/AMSA versus VP-16/AMSA/5-AZA in children with recurrent or refractory acute non-lymphocytic leukemia (ANLL).

- 2) To determine the duration of remission, using pulses of the induction regimen as continuation therapy.
- 3) To study the relative toxicites of these two therapies.

Technical Approach: Patients $\leq 2l$ years of age at the time initial diagnosis who have either failed to respond to induction therapy or who are in first relapsed are eligible for this study. Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered on this study.

Date: 7 Nov 89 Proj No: POG 8821 Status: Ongoing
Title: AML#3 Intensive Multiagent Therapy vs. Autologous Bone Marrow Transplant
Early in 1st CR for Children with Acute Myelocytic Leukemia.

Start Date 29 Jul 88	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	7
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Re	porting Period: 0
Total Number of Subjects Enrolled to	
Date of Periodic Review	Results

Objective(s): To determine the disease-free survival (DFS) and event-free survival (EFS) in childhood acute myelocytic leukemia (AML) offered by intensive chemotherapy with alternating non-cross resistant drug combinations for nine courses.

To determine if short (three course) intensive chemotherapy (identical to the first three courses of the above regimen) followed by autologous bone marrow transplant (BMT) using the Busulfan/Cytoxan preparative regimen and 4-Hydroxycyclophosphamide (4-HC) purged marrow is effective therapy.

To compare, in a randomized study, the results of the above 2 regimens and to correlate the treatment outcome with clinical and laboratory features.

Technical Approach: Patient eligibility and therapy will follow the schema outlined in the study protocol.

Progress: Two patients have been sent here for autologous bone marrow transplant and will return to their parent institution when received.

Detail Summary Sheet

Date: 7 Nov 89	Proj No:	POG 8823 Status: Ongoing
Title: Recombinant Alpha-Int Phase II	erferon in	Childhood Chronic Myelogenous Leukemia
Start Date: 10 Jul 89		Est Comp Date:
Principal Investigator		Facility
Allen R. Potter, LTC, MC		Brooke Army Medical Center
Dept/Svc Department of Pediatrics Key Words: Leukemia, myelogenous		Associate Investigators:
Accumulative MEDCASE Cost:		Est Accumulative OMA Cost:
Number of Subjects Enrolled D Total Number of Subjects Enro Date of Periodic Review		rting Period: 0
	oxicity, r	esponse rate and duration of response t

Technical Approach: Eligible patinets must have been < 21 years of age at the time of initial diagnosis and must not have received prior anti-neoplastic

therapy. Therapy will follow the schema outlined in the study protocol.

therapy with recombinant alpha interferon for newly diagnosed "adult" chronic myelogenous leukemia (ACML) in chronic phase, and for "juvenile" chronic myelo-

genous leukemia (JCML) occurring within the first two decades.

POG 8827

Status:

Ongoing

Proj No:

Date: 7 Nov 89

Start Date: 17 Oct 88	Est Comp Date:
Principal Investigator	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Hodgkin's disease	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled Dur	ing Reporting Period: 0
Total Number of Subjects Enroll	~ · · · · · · · · · · · · · · · · · · ·

have relapsed Hodgkin's disease and to determine the toxicity associated with this regimen.

Technical Approach: Patients with relapsed Hodkin's disease who were <21 years of age at time of inidial dianosis are eligible. Patients must not have responded or have relapsed after two or more courses of MOPP and two courses of ABVD, either given together or sequentially. Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered on this study.

	No: POG 8828 Status: Ongoing
Title: Late Effects of Treatment of	of Hodgkin's Disease, Non-therapeutic Study
Start Date: 12 Jun 89	Est Comp Date:
Principal Investigator	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Hodgkin's disease	
•	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During	Reporting Period: 1
Total Number of Subjects Enrolled t	
Date of Periodic Review Results	
Objective(s): To estimate the inc	idence of various late effects seen in
	eated by the regimens of POG 8625 and POG
	known sequelae of Hodgkin's disease and its
treatment.	

Technical Approach: All patients registered on front-lin phase III POG Hodgkin's disease therapeutic studies POG 8625 and POG 8725 after the opening of this study will be eligible and must be registered on this study unless the patient or parent/guardian refuses.

Progress: No reportable data are available at this time.

Date: 7 Nov 89 Proj N	No: POG 8829 Status: Ongoing
Title: A Case-Control Study of Hodg therapeutic Study	kin's Disease in Childhood - A Non-
Start Date: 10 Jul 89	Est Comp Date:
Principal Investigator	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Hodgkin's disease	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During I	Reporting Period: 0
Total Number of Subjects Enrolled to	Date: 0
Date of Periodic Review	Results
Objective(s): To conduct the first	interview case-control study of childhoo

Technial Approach: All pediatric oncology patients, less than 15 years of age, with a newly confirmed diagnosis of Hodgkin's disease are eligible. Telephone interview and adminstration of questionnaire will be conducted.

Hodgkin's disease to learn more about the epidemiology of the disease in

Progress: This is a new study.

children.

Proj No: POG 8832

Status:

Ongoing

	ion Chemotherapy with Cisplatin and ARA-C for ted Supratentorial Malignant Tumors, Phase II
Start Date: 10 Jul 89	Est Comp Date:
Principal Investigator	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc Department of Pediatrics	Associate Investigators:
Key Words:	
Tumors, CNS	
Accumulative MEDCASE	Est Accumulative

Date of Periodic Review Results

Objective(s): 1) To determine acute, subacute, and combined-treatment toxicities of chemotherapy with cisplatin and Ara-C followed by cranial irradiation in

Number of Subjects Enrolled During Reporting Period: 0

Total Number of Subjects Enrolled to Date: 0

OMA Cost:

- 2) To estimate the efficacy of a 15-week period of chemotherapy with cisplatin and Ara-C in children with malignant supratentorial (CNS) tumors.
- 3) To estimate the feasibility and completeness of second surgical resection in children with incompletely-resected malignant supratentorial tumors after treatment with initial chemotherapy.

Technical Approach: Patients \geq 3 years and \leq 21 years at diagnosis are eligible. Therapy will follow the schema outlined in the study protocol.

Progress: This is a new study.

Date: 7 Nov 89

children.

POG 8833

Status:

Ongoing

Proj No:

Date:

gical exam.

7 Nov 89

Start Date 29 Jul 88	Est Comp Date:
Principal Investigator (vice Thomas)	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
A STATE OF THE STA	Pot Assert
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Re	
Total Number of Subjects Enrolled to	Date: 0

To monitor possible acute and chronic toxicities of the chemotherapy, including neurological and audiological toxicity. To assess unusual irradiation-related toxicity post-chemotherapy.

four courses of combination high-dose cyclophosphamide and cis-platinum prior to radiation therapy. Response will be measured by CT and/or MRI scan and neurolo-

To Estimate the disease control interval for the population under study following chemotherapy and radiation therapy.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered to date.

Date: 7 Nov 89

Date: 7 Nov 89	Proj No:	POG 8844	Status: Ongoing
Title: Stage D Neuroblastor	na #4: Bone	Marrow Transpla	ant in the Treatment of
Children > 365 Days at Diagnosis with Stage D Neuroblastoma			
Start Date: 12 Dec 88		Est Comp Date:	
Principal Investigator		Facility	
Allen R. Potter, LTC, MC		Brooke Army Med	dical Center
Dept/Svc		Associate Inves	stigators:
Department of Pediatrics			
Key Words:			
Neuroblastoma			
Accumulative MEDCASE		Est Accumulation	ve
Cost:		OMA Cost:	
Number of Subjects Enrolled	During Repor	rting Period:	0
Total Number of Subjects En	rolled to Dat	e: 0	
Date of Periodic Review		Result	S
			

Objective(s): 1) To determine whether the outcome of children > 365 days with Stage D neuroblastoma who are treated at institutions offering an autologous bone marrow transplant (ABMT) option to conventional therapy and who have good initial response to conventional therapy, is better than the outcome of similar children who are treated at institutions which do not offer the transplant option.

2) To evaluate the toxicities associated with this protocol.

Technical Approach: Patients >365 days and <21 years at diagnosis previously registered on POG 8741/42 who have completed post-induction evaluation and postinduction surgery are eligible. Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered on this study.

	POG 8850 Status: Ongoing		
Title: Evaluation of Vincristine, Adriamycin, Cyclophosphamide, and			
Dactinomycin with or without the Addition of Ifosfamide and Etoposide in the			
Treatment of Patients with Newly-diagnosed Ewing's Sarcoma or Primitive Neur-			
ectodermal Tumor of Bone, Phase III			
Start Date: 13 Mar 89	Est Comp Date:		
Principal Investigator	Facility		
Allen R. Potter, LTC, MC	Brooke Army Medical Center		
Dept/Svc	Associate Investigators:		
Department of Pediatrics			
Key Words:			
Ewing's sarcoma			
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled During Reporting Period: 0			
Total Number of Subjects Enrolled to Date: 0			
Date of Periodic Review	Results		

Objective(s): To determine the event-free survival and survival of patients with Ewing's sarcoma and PNET of the bone who are treated with etoposide and ifosfamide in combination with standard therapy, and to compare their EFS and survival rates with those of patients treated with standard therapy alone.

Technical Approach: Patients <30 years of age with newly diagnosed Ewing's sarcoma, PNET of bone, or a diagnosis compatible with primitive sarcoma of bone are eligible. Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered on this study.

Detail Summary Sheet

Date: 7 Nov 89	Proj No: POG 8861	Status: Ongoing
Title: The Efficacy of MESNA induced Hemorrhagic Cystitis	n Preventing a Recurre	nce of Cyclophosphamide-
Start Date: 10 Jul 89	Est Comp Date	•
Principal Investigator	Facility	
Allen R. Potter, LTC, MC	Brooke Army M	edical Center
Dept/Svc	Associate Inv	estigators:
Department of Pediatrics Key Words: Cystitis, hemorrhagic		
Accumulative MEDCASE	Est Accumulat	ive
Cost:	OMA Cost:	
Number of Subjects Enrolled Dur		0
Total Number of Subjects Enroll		
Date of Periodic Review	Resul	ts
Objective(s): To determine who	ther mesna can prevent	the recurrence of acute.

Objective(s): To determine whether mesna can prevent the recurrence of acute, cyclophosphamide-induced hemorrhagic cystitis in patients in whom continued therapy with cyclophosphamide is medically indicated.

Technical Approach: Patients who develop hematuria during, or within a 24 hour period immediately following, the administration of cyclophosphamide being administered for a disease in which cyclophosphamide is generally accepted as appropriate therapy are eligible. Therapy will follow the schema outlined in the study protocol.

Date: 7 Nov 89 Pr	coj No: POG 8862 Status: Ongoing		
Title: Treatment of First Marrow Relapse and/or Extramedullary Relapse of Childhood Acute T-Lymphoblastic Leukemia and T-Non-Hodgkin's Lymphoma with			
Combination Chemotherapy include	ing 2'-Deoxycoformycin, Phase II		
Start Date: 12 Jun 89	Est Comp Date:		
Principal Investigator	Facility		
Allen R. Potter, LTC, MC	Brooke Army Medical Center		
Dept/Svc	Associate Investigators:		
Department of Pediatrics			
Key Words:			
T-lymphoblastic leukemia			
T-Non-Hodgkin's lymphoma			
Accumulative MEDCASE	Est Accumulative		
Cost:	OMA Cost:		
Number of Subjects Enrolled Dur:	ing Reporting Period: 0		
Total Number of Subjects Enrolle	ed to Date: 0		
Date of Periodic Review	Results		
			

Objective(s): 1) To assess the toxicity and efficacy of low dose deoxycofor-mycin (DCF) given as IV bolus injection in prolonging the duration of remission for patients with T-ALL/T-NHL in second remission.

- 2) To determine the correlation of clinical responses and toxicities with plasma levels of adenosin deaminase (ADA), adenosin (ado) and Deoxyadenosine (dado), dATP/ATP ratios in RBCs, and in vitro sensitivity of leukemia cells to DCF plus dado.
- 3) To determine the efficacy of IV methotrexate and Iv 6-mercaptopurine in patients with T-ALL and T-NHL.

Tehonical Approach: Patients < 21 years of age at time of diagnosis in first relapsed documented by aspirate or biopsy are eligible. Therapy will follow the schema outlined in the study protocol.

Date: 7 Nov 89 Pro	oj No: POG 8863 Status: Ongoing
Title: High Dose Cytosine Arabin	noside in the Treatment of Advanced Childhood
Tumors Resistant to Conventional	Therapy, Phase II
Start Date: 10 Jul 89	Fot Com- Date:
	Est Comp Date:
Principal Investigator	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	_
Key Words:	
mey mercer	
Accumulative MEDCASE	Est Accumulative
	· · · · · · · · · · · · · · · · · · ·
Cost:	OMA Cost:
Number of Subjects Enrolled Durin	
Total Number of Subjects Enrolled	i to Date: 0
Date of Periodic Review	Results
Objective(s): To determine wheth	ner high dose cytosine arabinoside is effective
	ldhood tumors resistant to conventional therap
THE CLEACEMENT OF SOVANCED CHILL	toucon comors resistant to conventional therap

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Date: 7 Nov 89	Proj No:	POG 8865	Status: Ongoing
Title: Recombinant Alpha-	Interferon in	Relapsed T-C	ell Disease, Phase II
Start Date: 10 Jul 89		Est Comp Date	e:
Principal Investigator		Facility	
Allen R. Potter, LTC, MC		Brooke Army	Medical Center
Dept/Svc Department of Pediatrics Key Words: T-cell ALL/Lymphoma		Associate In	vestigators:
Accumulative MEDCASE Cost:		Est Accumula OMA Cost:	tive
Number of Subjects Enrolle Total Number of Subjects E			0
Date of Periodic Review		Resu	lts
Objective(s): 1) To dete			q-IFN in children with T-

2) To correlate the response rate to the presence of interferon receptors, oncogene expression, modulation of oncogene expression by interferon, DNA con-

Technical Approach: Patients <21 years of age at initial diagnosis and in relapse with T-ALL or T-NHL are eligible. Therapy will follow the schema outlined in the study protocol.

tent, and antiproliferative effect of IFN in vitro on T-cell lymphoblasts.

Date: 7 Nov 89 Pr	roj No: POG 8866 Status: Ongoing
	jugated L-Asparaginase in Combination with
Standard Agents as Second-Line 1	Induction Therapy for Children with Acute
Lymphoblastic Leukemia in Bone M	Marrow Relapse, Phase II
Start Date: 10 Jul 89	Est Comp Date:
Principal Investigator	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Leukemia, lymphoblastic	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled Duri	ing Reporting Period: 0
Total Number of Subjects Enrolle	ed to Date: 0
Date of Periodic Review	Results
Objective(s): To compare, in a	randomized trial, the efficacy, toxicity and

feasibility of administration of PEG-L-asparaginase versus native L-asparaginase as part of a standard combination chemotherapy re-induction regimen for children with ALL in second relapse.

Technical Approach: Eligible patients must have been <21 years of age at initial diagnosis and must have ALL in second marrow relapse. Therapy will follow the schema outlined in the study protocol.

Date: 7 Nov 89	Proj No: POG 8889	Status: Ongoing
Title: Intergroup Rhabdomyos Disease	arcoma Study-IV Pilot	Study for Clinical Group IV
Start Date: 10 Jul 89	Est Comp Da	ite:
Principal Investigator	Facility	
Allen R. Potter, LTC, MC	Brooke Army	Medical Center
Dept/Svc	Associate I	investigators:
Department of Pediatrics		_
Key Words:		
Rhabdomyosarcoma		
Accumulative MEDCASE	Est Accumul	lative
Cost:		1 .
Number of Subjects Enrolled D	•	1:
Total Number of Subjects Enro		
Date of Periodic Review	Res	sults

Objective(s): To determine the feasibility of, and toxicity associated with, using ifosfamide-doxorubicin (ID) as induction chemotherapy and subsequently, as part of maintenance chemotherapy with vincristine-actinomycin D - cyclophosphamide (VAC) for rhabdomyosarcoma and similar sarcomas and to determine the feasibility of/and toxicity associated with hyperfractionated radiotherapy program following induction chemotherapy.

Technical Approach: Patients <21 years of age at diagnosis with pathologically-proven rhabdomyosarcoma or undifferentiated sarcoma, or extraosseous Ewing's sarcoma are eligible. Therapy will follow the schema outlined in the study protocol.

	POG 8930 Status: Ungoing
Title: A Comprehensive Genetic Analysi	s of Brain Tumors
Start Date: 10 Jul 89	Est Comp Date:
Principal Investigator	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Brain tumor	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled During Repo	
Total Number of Subjects Enrolled to Da	nte:
Date of Periodic Review	Results
	ely the clinical significance of abnor- easured by flow cytometry and to determine c abnormalities in pediatric brain

Technical Approach: Any patient with a brain tumor who has had tumor tissue submitted for study and who is subsequently registered on a POG frontline therapeutic protocol is eligible for this study.

POG 8935

Status:

Ongoing

Proj No:

Title: A Sxudy of the Biological Beha	vior of Optic Pathway lumors, Phase II	
Start Date: 10 Jul 89	Est Comp Date:	
Principa Investigator	Facility	
Allan R. Potter, LTC, MC	Brooke Army Medical Center	
Dept/Svc	Associate Investigators:	
Department of Pediatrics		
Key Words:		
Optic pathway tumors		
Accumulative MEDCASE	Est Accumulative	
st: OMA Cost:		
Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to D	orting Period:	
Date of Periodic Review	Results	
Objective(s): 1) To assess time to pr	ogression of optic pathway tumors (OPTs).	

2) To estimate the response rate of radiation therapy in children with OPTs, when measured at 2 years post-irradiation.

Technical Approach: Patients <21 years of age at the time of diagnosis with imaging evidence of intraorbital or chiasmatic mass with or without visual loss are eligible. Within two weeks following surgery, slides will be submitted to pathology for review.

Progress: This is a new study.

7 Nov 89

Date:

Date: / Nov 89	Proj No: POG 8936 Status: Ongoing
Title: Phase II Study of Carb	oplatin (CBDCA) in the Treatment of Children wit
Progressive Optic Pathway Tumo	rs
Start Date: 10 Jul 89	Est Comp Date:
Principal Investigator	Facility
Allen R. Potter, LTC, MC	Brooke Army Medical Center
Dept/Svc	Associate Investigators:
Department of Pediatrics	
Key Words:	
Optic pathway tumors	
Accumulative MEDCASE	Est Accumulative
Cost:	OMA Cost:
Number of Subjects Enrolled Du	
Total Number of Subjects Enrol	· · · · · · · · · · · · · · · · · · ·
Date of Periodic Review	Results
	esponse rate to CBDCA in children <5 years of ag
with optic pathway tumors and	to assess the efficacy of CBDCA in delaying

Technical Approach: Patients will be eligible for treatment on this study if they meet the eligibility criteria for POG 8935, if they are <5 years of age and if there is evidence of progressive disease. Therapy will follow the schema youtlined in the study protocol.

Progress: This is a new study.

progression of disease.